## Missouri Long Term Care Facilities Directory

ABBEY SENIOR HEALTH 206 NORTH MAIN ST		<b>Telephone</b> (636) 240-5754	Alzheimer's Unit	No
O'FALLON	MO 63366-2299	Level of Care: SNF	Bed Capacity	55
Mailing Address 206 NORTH MAIN S		County SAINT CHARLES	DMH Licensed	No
O'FALLON	MO 63366-2299	Region 5 Medicare/Medicaid	Facility Number	27367
		region o medical emedical	Tuenty Tumber	27307
ABBEY WOODS CENTER FOR REI	HABILITATION AND HEALING			
5026 FARAON ST		<b>Telephone</b> (816) 279-1591	Alzheimer's Unit	No
SAINT JOSEPH	MO 64506-3375	Level of Care: SNF	Bed Capacity	100
Mailing Address 5026 FARAON ST		County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64506-3375	Region 4 Medicare/Medicaid	<b>Facility Number</b>	01463
ABERDEEN HEIGHTS		<b>7.1.1.</b> (214) 000 5000		
505 COUCH AVE	160 (2122 552)	<b>Telephone</b> (314) 909-6000	Alzheimer's Unit	No
KIRKWOOD	MO 63122-5536	Level of Care: ALF**	Bed Capacity	36
Mailing Address 505 COUCH AVE KIRKWOOD	MO (2122 552)	County SAINT LOUIS COUNTY	DMH Licensed	No
KIKKWOOD	MO 63122-5536	Region 7	Facility Number	27570
ABERDEEN HEIGHTS				
505 COUCH AVE		<b>Telephone</b> (314) 909-6000	Alzheimer's Unit	Yes
KIRKWOOD	MO 63122-5536	Level of Care: ICF	Bed Capacity	16
Mailing Address 505 COUCH AVE		County SAINT LOUIS COUNTY	DMH Licensed	No
KIRKWOOD	MO 63122-5536	Region 7	Facility Number	27570
ABERDEEN HEIGHTS		<b>T. I.</b> (24.1) 200 5000		
505 COUCH AVE		<b>Telephone</b> (314) 909-6000	Alzheimer's Unit	No
MIDMINOOD	MO (0100 550)	T I CO CONTE	D 10 11	20
KIRKWOOD	MO 63122-5536	Level of Care: SNF	Bed Capacity	38 N
Mailing Address 505 COUCH AVE		County SAINT LOUIS COUNTY	DMH Licensed	No
	MO 63122-5536 MO 63122-5536		= -	
Mailing Address 505 COUCH AVE	MO 63122-5536	County SAINT LOUIS COUNTY	DMH Licensed	No
Mailing Address 505 COUCH AVE KIRKWOOD	MO 63122-5536	County SAINT LOUIS COUNTY	DMH Licensed	No
Mailing Address 505 COUCH AVE KIRKWOOD  ACKERT PARK SKILLED NURSIN	MO 63122-5536	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	DMH Licensed Facility Number	No 27570
Mailing Address 505 COUCH AVE KIRKWOOD  ACKERT PARK SKILLED NURSIN 894 LELAND AVE	MO 63122-5536  G & REHABILITATION CENTER	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (314) 726-4767	DMH Licensed Facility Number  Alzheimer's Unit	No 27570 No
Mailing Address 505 COUCH AVE KIRKWOOD  ACKERT PARK SKILLED NURSIN 894 LELAND AVE UNIVERSITY CITY	MO 63122-5536  G & REHABILITATION CENTER	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (314) 726-4767 Level of Care: SNF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 27570 No 130
Mailing Address 505 COUCH AVE KIRKWOOD  ACKERT PARK SKILLED NURSIN 894 LELAND AVE UNIVERSITY CITY Mailing Address 894 LELAND AVE UNIVERSITY CITY	MO 63122-5536  G & REHABILITATION CENTER  MO 63130-3239  MO 63130-3239	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (314) 726-4767 Level of Care: SNF County SAINT LOUIS COUNTY	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	No 27570 No 130 No
Mailing Address 505 COUCH AVE KIRKWOOD  ACKERT PARK SKILLED NURSIN 894 LELAND AVE UNIVERSITY CITY Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADDINGTON PLACE OF LEE'S SU	MO 63122-5536  G & REHABILITATION CENTER  MO 63130-3239  MO 63130-3239	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (314) 726-4767 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 27570 No 130 No 02100
Mailing Address 505 COUCH AVE KIRKWOOD  ACKERT PARK SKILLED NURSIN 894 LELAND AVE UNIVERSITY CITY Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADDINGTON PLACE OF LEE'S SU 2160 SE BLUE PARKWAY	MO 63122-5536  G & REHABILITATION CENTER  MO 63130-3239  MO 63130-3239  MMIT	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (314) 726-4767 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (816) 554-0101	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 27570 No 130 No 02100
Mailing Address 505 COUCH AVE KIRKWOOD  ACKERT PARK SKILLED NURSIN 894 LELAND AVE UNIVERSITY CITY Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADDINGTON PLACE OF LEE'S SU 2160 SE BLUE PARKWAY LEE'S SUMMIT	MO 63122-5536  G & REHABILITATION CENTER  MO 63130-3239  MO 63130-3239  MMIT  MO 64063-1007	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (314) 726-4767 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (816) 554-0101 Level of Care: ALF**	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 27570 No 130 No 02100 Yes 88
Mailing Address 505 COUCH AVE KIRKWOOD  ACKERT PARK SKILLED NURSIN 894 LELAND AVE UNIVERSITY CITY Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADDINGTON PLACE OF LEE'S SU 2160 SE BLUE PARKWAY LEE'S SUMMIT Mailing Address 2160 SE BLUE PARK	MO 63122-5536  G & REHABILITATION CENTER  MO 63130-3239  MO 63130-3239  MMIT  MO 64063-1007  KWAY	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (314) 726-4767 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (816) 554-0101 Level of Care: ALF** County JACKSON	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	No 27570 No 130 No 02100 Yes 88 No
Mailing Address 505 COUCH AVE KIRKWOOD  ACKERT PARK SKILLED NURSIN 894 LELAND AVE UNIVERSITY CITY Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADDINGTON PLACE OF LEE'S SU 2160 SE BLUE PARKWAY LEE'S SUMMIT	MO 63122-5536  G & REHABILITATION CENTER  MO 63130-3239  MO 63130-3239  MMIT  MO 64063-1007	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (314) 726-4767 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (816) 554-0101 Level of Care: ALF**	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 27570 No 130 No 02100 Yes 88
Mailing Address 505 COUCH AVE KIRKWOOD  ACKERT PARK SKILLED NURSIN 894 LELAND AVE UNIVERSITY CITY Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADDINGTON PLACE OF LEE'S SU 2160 SE BLUE PARKWAY LEE'S SUMMIT Mailing Address 2160 SE BLUE PARK	MO 63122-5536  G & REHABILITATION CENTER  MO 63130-3239  MO 63130-3239  MMIT  MO 64063-1007  KWAY  MO 64063-1007	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (314) 726-4767 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (816) 554-0101 Level of Care: ALF** County JACKSON	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	No 27570 No 130 No 02100 Yes 88 No
Mailing Address 505 COUCH AVE KIRKWOOD  ACKERT PARK SKILLED NURSIN 894 LELAND AVE UNIVERSITY CITY Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADDINGTON PLACE OF LEE'S SU 2160 SE BLUE PARKWAY LEE'S SUMMIT Mailing Address 2160 SE BLUE PARI LEE'S SUMMIT  ADDINGTON PLACE OF SHOAL C 9601 NORTH TULLIS DR	MO 63122-5536  G & REHABILITATION CENTER  MO 63130-3239  MO 63130-3239  MMIT  MO 64063-1007  KWAY  MO 64063-1007	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (314) 726-4767 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (816) 554-0101 Level of Care: ALF** County JACKSON Region 3  Telephone (816) 407-9667	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 27570 No 130 No 02100 Yes 88 No 28136
Mailing Address 505 COUCH AVE KIRKWOOD  ACKERT PARK SKILLED NURSIN 894 LELAND AVE UNIVERSITY CITY Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADDINGTON PLACE OF LEE'S SU 2160 SE BLUE PARKWAY LEE'S SUMMIT Mailing Address 2160 SE BLUE PARI LEE'S SUMMIT  ADDINGTON PLACE OF SHOAL C 9601 NORTH TULLIS DR KANSAS CITY	MO 63122-5536  G & REHABILITATION CENTER  MO 63130-3239  MO 63130-3239  MMIT  MO 64063-1007  KWAY  MO 64063-1007  REEK  MO 64157-7890	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (314) 726-4767 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (816) 554-0101 Level of Care: ALF** County JACKSON Region 3  Telephone (816) 407-9667 Level of Care: ALF**	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 27570 No 130 No 02100 Yes 88 No 28136
Mailing Address 505 COUCH AVE KIRKWOOD  ACKERT PARK SKILLED NURSIN 894 LELAND AVE UNIVERSITY CITY Mailing Address 894 LELAND AVE UNIVERSITY CITY  ADDINGTON PLACE OF LEE'S SU 2160 SE BLUE PARKWAY LEE'S SUMMIT Mailing Address 2160 SE BLUE PARI LEE'S SUMMIT  ADDINGTON PLACE OF SHOAL C 9601 NORTH TULLIS DR	MO 63122-5536  G & REHABILITATION CENTER  MO 63130-3239  MO 63130-3239  MMIT  MO 64063-1007  KWAY  MO 64063-1007  REEK  MO 64157-7890	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (314) 726-4767 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (816) 554-0101 Level of Care: ALF** County JACKSON Region 3  Telephone (816) 407-9667	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 27570 No 130 No 02100 Yes 88 No 28136

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ADVANCE ASSISTED LIVING		W. L. J. (572) 722 5200	All I de la Tita	
252 PAYTON PLACE	MO (2720 7251	<b>Telephone</b> (573) 722-5200	Alzheimer's Unit N	
ADVANCE	MO 63730-7251	Level of Care: ALF		14
Mailing Address PO BOX 790	MO (2720 0700	County STODDARD		lo
ADVANCE	MO 63730-0790	Region 2	Facility Number 2842	6
AKINS HEALTH CARE, INC				
4432 WEST BELLE PL		<b>Telephone</b> (314) 652-8908	Alzheimer's Unit N	o
SAINT LOUIS	MO 63108-2617	Level of Care: RCF		20
Mailing Address 4432 WEST BELLE F		County SAINT LOUIS CITY	DMH Licensed Ye	
SAINT LOUIS	MO 63108-2617	Region 7	Facility Number 0007	
		1105-011	- H,	
ALBANY PLACE LLC				
520 S ALBANY		<b>Telephone</b> (417) 777-8040	<b>Alzheimer's Unit</b> N	o
BOLIVAR	MO 65613-2116	Level of Care: RCF*	Bed Capacity 1	6
Mailing Address PO BOX 176		County POLK	DMH Licensed Ye	es
BOLIVAR	MO 65613-0176	Region 1	Facility Number 2473	1
ALLEGRO				
ALLEGRO		m		
1055 BELLEVUE AVENUE		<b>Telephone</b> (314) 332-8372	Alzheimer's Unit Ye	
RICHMOND HEIGHTS	MO 63117-1827	Level of Care: ALF**		88
Mailing Address 1055 BELLEVUE AV		County SAINT LOUIS COUNTY		lo
RICHMOND HEIGHTS	MO 63117-1827	Region 7	Facility Number 3143	7
ALLWAYS KARE RESIDENTIAL FA	ACILITY, INC			
5076 WATERMAN	,	<b>Telephone</b> (314) 367-9516	Alzheimer's Unit N	О
SAINT LOUIS	MO 63108-1102	Level of Care: RCF	Bed Capacity 2	20
Mailing Address 5076 WATERMAN		County SAINT LOUIS CITY	DMH Licensed Ye	es
SAINT LOUIS	MO 63108-1102	Region 7	Facility Number 0521	2
AMBROSE PARK RESIDENTIAL C.	ARE			
517 NORTH OAK	110 (5505 45 )	<b>Telephone</b> (660) 668-3140	Alzheimer's Unit N	
COLE CAMP	MO 65325-1264	Level of Care: RCF		80
Mailing Address PO BOX 252		County BENTON		Ю
COLE CAMP	MO 65325-0252	Region 6	Facility Number 2631	3
ANEW HEALTHCARE SAVANNAH				
13277 STATE ROUTE D		<b>Telephone</b> (816) 324-5991	Alzheimer's Unit Ye	es
SAVANNAH	MO 64485-9431	Level of Care: SNF		88
Mailing Address 13277 STATE ROUT		County ANDREW		ю
SAVANNAH	MO 64485-9431	Region 4 Medicare/Medicaid	Facility Number 0714	
				•
ANEW SENIOR LIVING				
2801 NE 60TH ST		<b>Telephone</b> (816) 454-7755		o
GLADSTONE	MO 64119-2040	Level of Care: RCF	Bed Capacity 10	Ю
Mailing Address 2801 NE 60TH ST		County CLAY		Ю
GLADSTONE	MO 64119-2040	Region 4	Facility Number 1179	4

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ANNA DODSON HOME			
4616 HIGHWAY D	110	<b>Telephone</b> (573) 756-5530	Alzheimer's Unit No
FARMINGTON	MO 63640-7241	Level of Care: RCF*	Bed Capacity 20
Mailing Address 4616 HWY D	MO 62640 7241	County SAINT FRANCOIS	DMH Licensed Yes
FARMINGTON	MO 63640-7241	Region 2	Facility Number 02160
ANNA DODSON HOME			
4616 HIGHWAY D		<b>Telephone</b> (573) 756-5530	Alzheimer's Unit No
FARMINGTON	MO 63640-7241	Level of Care: RCF	Bed Capacity 17
Mailing Address 4616 HWY D	1410 03040 7241	County SAINT FRANCOIS	DMH Licensed Yes
FARMINGTON	MO 63640-7241	Region 2	Facility Number 02160
		•	
ANNA'S HOUSE RESIDENTIAL CAR	RE FACILITY LLC		
194 STATE HIGHWAY MM		<b>Telephone</b> (417) 473-6000	Alzheimer's Unit No
NIANGUA	MO 65713-8411	Level of Care: RCF	Bed Capacity 11
Mailing Address 194 STATE HWY MM		County WEBSTER	<b>DMH Licensed</b> Yes
NIANGUA	MO 65713-8411	Region 1	Facility Number 13487
ANNIE'S HOUSE INC			
25228 BUZZARD DRIVE		<b>Telephone</b> (573) 238-1300	Alzheimer's Unit No
MARBLE HILL	MO 63764-9408	Level of Care: RCF	Bed Capacity 40
Mailing Address 25228 BUZZARD DRI		County BOLLINGER	DMH Licensed Yes
MARBLE HILL	MO 63764-9408	Region 2	Facility Number 30984
ANTHOLOGY OF BURLINGTON CR	REEK		
6311 NORTH COSBY AVENUE		<b>Telephone</b> (816) 505-3030	<b>Alzheimer's Unit</b> Yes
KANSAS CITY	MO 64151-2344	Level of Care: ALF**	<b>Bed Capacity</b> 110
Mailing Address 6311 N COSBY AVEN		County PLATTE	DMH Licensed No
KANSAS CITY	MO 64151-2344	Region 4	Facility Number 30198
ANTHOLOGY OF CLAYTON VIEW			
8825 EAGER ROAD		<b>Telephone</b> (314) 961-1700	Alzheimer's Unit Yes
SAINT LOUIS	MO 63144-1205	Level of Care: ALF**	<b>Bed Capacity</b> 90
Mailing Address 8825 EAGER ROAD		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63144-1205	Region 7	Facility Number 30363
ANTHOLOGY OF THE PLAZA			
2 EMANUEL CLEAVER II BLVD		<b>Telephone</b> (816) 505-3030	Alzheimer's Unit Yes
KANSAS CITY	MO 64112-1712	Level of Care: ALF**	Bed Capacity 96
Mailing Address 2 EMANUEL CLEAVE		County JACKSON	DMH Licensed No
KANSAS CITY	MO 64112-1712	Region 3	Facility Number 31791
ANTHOLOGY OF TOWN & COUNTI	RY		
1020 WOODS MILL ROAD		<b>Telephone</b> (636) 527-4444	Alzheimer's Unit Yes
TOWN AND COUNTRY	MO 63017-0603	Level of Care: ALF**	<b>Bed Capacity</b> 95
Mailing Address 1020 WOODS MILL R	OAD	County SAINT LOUIS COUNTY	DMH Licensed No
TOWN AND COUNTRY	MO 63017-0603	Region 7	Facility Number 30612

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ANTHOLOGY OF WILDWOOD 251 PLAZA DRIVE WILDWOOD Mailing Address 251 PLAZA DRIVE WILDWOOD	MO 63040-1203 MO 63040-1203	Telephone (636) 273-3900 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7		94 No
APPLE RIDGE CARE CENTER 100 WEST THOMAS AVE WAVERLY Mailing Address PO BOX 188 WAVERLY	MO 64096-9143 MO 64096-0188	Telephone (660) 493-2232 Level of Care: SNF County LAFAYETTE Region 3 Medicare/Medicaid		60 No
APPLEGATE RETIREMENT HOMI 1204 TELEGRAPH RD SAINT LOUIS Mailing Address 1204 TELEGRAPH R SAINT LOUIS	MO 63125-2528	Telephone (314) 631-2003 Level of Care: RCF* County SAINT LOUIS COUNTY Region 7	Bed Capacity 3	No 38 es 09
APPLETON CITY MANOR 600 NORTH OHIO ST APPLETON CITY Mailing Address PO BOX 98 APPLETON CITY	MO 64724-1609 MO 64724-0098	Telephone (660) 476-2128 Level of Care: SNF County SAINT CLAIR Region 1 Medicare/Medicaid	Bed Capacity 6	No 60 No 37
ARBOR HILLS NURSING AND REE 800 CHAMBERS RD FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON	MO 63135-2133	Telephone (314) 524-1111 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity 15	No 50 No 35
ARBOR HILLS NURSING AND REE 800 CHAMBERS RD FERGUSON Mailing Address 800 CHAMBERS RD FERGUSON	MO 63135-2133	Telephone (314) 524-1111 Level of Care: ALF** County SAINT LOUIS COUNTY Region 7	Bed Capacity 2	No 28 No 35
ARBORS AT DUNSFORD COURT- M 775 DUNSFORD ROAD SULLIVAN Mailing Address 775 DUNSFORD RD SULLIVAN	MEMORY CARE ASSISTED LIVING I MO 63080-1270 MO 63080-1270	Telephone (573) 468-2600 Level of Care: ALF** County FRANKLIN Region 6		50 No
ARBORS AT GLENDALE GARDEN 1300 SOUTH MAIN CLINTON Mailing Address 1300 S MAIN CLINTON	S - MEMORY CARE BY AMERICARE  MO 64735-2728  MO 64735-2728	Telephone (660) 885-2272 Level of Care: ALF** County HENRY Region 1	Bed Capacity 4	es 42 No 54

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ADDODS AT HADMONV CADDENS	-MEMORY CARE ASSISTED LIVING	DV AMEDICAD	ое тие		
539 EAST YOUNG AVENUE	-MEMORI CARE ASSISTED LIVING	Telephone	(660) 429-0034	Alzheimer's Unit	Yes
WARRENSBURG	MO 64093-	Level of Care:	ALF**	Bed Capacity	24
Mailing Address 539 EAST YOUNG A			HNSON	DMH Licensed	No.
WARRENSBURG	MO 64093-	Region 3	1113011	Facility Number	31389
WARRENSBURG	NIO 04073-	Region 5		Facility Number	31369
ARBORS AT HIGHLAND CREST - A	LZHEIMERS ASSISTED LIVING BY	AMERICARE, T	HE		
620 GILASPY ROAD		Telephone	(660) 627-8004	Alzheimer's Unit	Yes
KIRKSVILLE	MO 63501-4678	Level of Care:	ALF**	<b>Bed Capacity</b>	28
Mailing Address 620 GILASPY RD		County AD	AIR	DMH Licensed	No
KIRKSVILLE	MO 63501-4678	Region 5		Facility Number	23608
ARBORS AT LAKEVIEW BEND - AS	SSISTED LIVING BY AMERICARE, T	не			
1700 ASBURY CIRCLE WEST	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Telephone	(573) 581-8777	Alzheimer's Unit	Yes
MEXICO	MO 65265-1400	Level of Care:	ALF**	Bed Capacity	39
Mailing Address 1722 HUNTINGFIELI			DRAIN	DMH Licensed	No
MEXICO	MO 65265-3808	Region 5		Facility Number	13544
MEMOO	110 03203 3000	Region 5		Tuellity Tullises	13344
ARBORS AT MOUNT CARMEL, TH	E				
723 FIRST CAPITOL DR		Telephone	(636) 946-4140	Alzheimer's Unit	No
SAINT CHARLES	MO 63301-2729	Level of Care:	ALF**	Bed Capacity	30
Mailing Address 723 FIRST CAPITOL		County SA	INT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63301-2729	Region 5		Facility Number	29396
ARBORS AT PARKSIDE - MEMORY	CARE ASSISTED LIVING BY AMER	RICARE			
1700 EAST 10TH ST		Telephone	(573) 364-2602	Alzheimer's Unit	Yes
ROLLA	MO 65401-4600	Level of Care:	ALF**	Bed Capacity	22
Mailing Address 1700 E 10TH ST		County PH	ELPS	DMH Licensed	No
ROLLA	MO 65401-4600	Region 6		Facility Number	13589
ARRORS AT VICTORIAN PLACE O	F CUBA, MEMORY CARE ASSISTED	LIVING RV AM	IERICARE THE		
903 HWY DD	r com, memori chile noongreb	Telephone	(573) 885-0379	Alzheimer's Unit	Yes
CUBA	MO 65453-8089	Level of Care:	ALF**	Bed Capacity	32
Mailing Address 903 HWY DD			AWFORD	DMH Licensed	No
CUBA	MO 65453-8089	Region 6		Facility Number	27071
ADDODG AT MICTORIAN DI ACE O	E WACHINGTON MEMORY CARE	CCICTED I IVIN	IC DV AMEDICADE II		
	F WASHINGTON, MEMORY CARE A				V
2701 RABBIT TRAIL DR	MO 62000 6711	Telephone	(636) 390-0011	Alzheimer's Unit	Yes
WASHINGTON	MO 63090-6711	Level of Care:	ALF**	Bed Capacity	32
Mailing Address 2701 RABBIT TRAIL		·	ANKLIN	DMH Licensed	No
WASHINGTON	MO 63090-6711	Region 6		Facility Number	28065
ARBORS AT WESTBROOK TERRA	CE-ALZHEIMER'S ASSISTED LIVING	G BY AMERICA	RE		
3409 NORTH 10 MILE DR		Telephone	(573) 556-5648	Alzheimer's Unit	Yes
JEFFERSON CITY	MO 65109-0530	Level of Care:	ALF**	<b>Bed Capacity</b>	26
Mailing Address 3409 NORTH 10 MIL	E DR	County CO	LE	DMH Licensed	NT-
JEFFERSON CITY		·		Divili Licenseu	No

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ADDODE AT WESTDINGE DI ACE	MEMODY CADE BY AMEDICADE	THE	
539 NORTH WEST ST	- MEMORY CARE BY AMERICARE,	<b>Telephone</b> (573) 471-6484	Alzheimer's Unit Yes
SIKESTON	MO 63801-5443	Level of Care: ALF**	
Mailing Address 539 NORTH WEST S		County SCOTT	DMH Licensed No
SIKESTON	MO 63801-5443	Region 2	Facility Number 12693
ARIZONA CARE CENTER			
101 ARIZONA ST		<b>Telephone</b> (573) 237-4830	Alzheimer's Unit No
NEW HAVEN	MO 63068-1210	Level of Care: ALF	Bed Capacity 15
Mailing Address 101 ARIZONA ST		County FRANKLIN	DMH Licensed Yes
NEW HAVEN	MO 63068-1210	Region 6	Facility Number 19080
	~~~		
ARMOUR OAKS SENIOR LIVING	COMMUNITY	T. I. 1 (01.6) 2.62 5141	
8100 WORNALL RD	NO 64114 5006	<b>Telephone</b> (816) 363-5141	Alzheimer's Unit No
KANSAS CITY	MO 64114-5806	Level of Care: ALF	Bed Capacity 47
Mailing Address 8100 WORNALL RD		County JACKSON	DMH Licensed No
KANSAS CITY	MO 64114-5806	Region 3	Facility Number 00199
ARMOUR OAKS SENIOR LIVING	COMMUNITY		
8100 WORNALL RD		<b>Telephone</b> (816) 363-5141	Alzheimer's Unit No
KANSAS CITY	MO 64114-5806	Level of Care: SNF	Bed Capacity 38
Mailing Address 8100 WORNALL RD		County JACKSON	DMH Licensed No
KANSAS CITY	MO 64114-5806	Region 3 Medicare/Medicaid	Facility Number 00199
		region 5 Medicare/Medicard	Tuesday 1 (united to 00177)
ARROWHEAD SENIOR LIVING CO	OMMUNITY		
6100 ARROWHEAD DRIVE		<b>Telephone</b> (573) 302-7111	Alzheimer's Unit Yes
OSAGE BEACH	MO 65065-	Level of Care: ALF**	<b>Bed Capacity</b> 90
Mailing Address 6100 ARROWHEAD	DRIVE	County CAMDEN	<b>DMH Licensed</b> No
OSAGE BEACH	MO 65065-	Region 6	Facility Number 31536
ARROWHEAD SENIOR LIVING CO	DMMUNITY		
6100 ARROWHEAD DRIVE		<b>Telephone</b> (573) 302-7111	Alzheimer's Unit No
OSAGE BEACH	MO 65065-	Level of Care: SNF	<b>Bed Capacity</b> 80
Mailing Address 6100 ARROWHEAD	DRIVE	County CAMDEN	DMH Licensed No
OSAGE BEACH	MO 65065-	Region 6 Medicare/Medicaid	Facility Number 31536
ASCENSION LIVING SHERBROOK	TE VII I AGE		
4005 RIPA AVE	E VILLAGE	Telephone (214) 544 1111	Alzheimer's Unit Yes
SAINT LOUIS	MO 63125-2378	Telephone (314) 544-1111  Level of Care: SNF	Bed Capacity 167
	WIO 03123-2378		
Mailing Address 4005 RIPA AVE SAINT LOUIS	MO 63125 2378	County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	
STIM LOUIS	MO 63125-2378	Region 7 Medicare/Medicaid	Facility Number 15436
ASCENSION LIVING SHERBROOK	TE VILLAGE		
4005 RIPA AVE		<b>Telephone</b> (314) 544-1111	Alzheimer's Unit No
SAINT LOUIS	MO 63125-2378	Level of Care: ALF**	<b>Bed Capacity</b> 88
Mailing Address 4005 RIPA AVE		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63125-2378	Region 7	Facility Number 15436

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ASH GROVE HEALTHCARE FACIL	LITY		
401 NORTH MEDICAL DR		<b>Telephone</b> (417) 751-2575	Alzheimer's Unit Yes
ASH GROVE	MO 65604-1004	Level of Care: SNF	<b>Bed Capacity</b> 82
Mailing Address PO BOX 247		County GREENE	DMH Licensed No
ASH GROVE	MO 65604-0247	Region 1 Medicare/Medicaid	Facility Number 00200
1.01.01.01.0	355 3550 1 0217	region - Medicare/Medicard	1 ucing 1 units 1
ASHBROOK - ASSISTED LIVING B	Y AMERICARE		
500 ASHBROOK DR		<b>Telephone</b> (573) 756-5544	Alzheimer's Unit No
FARMINGTON	MO 63640-9235	Level of Care: ALF**	<b>Bed Capacity</b> 72
Mailing Address 500 ASHBROOK DR	1	County SAINT FRANCOIS	DMH Licensed No
FARMINGTON	MO 63640-9235	Region 2	Facility Number 18138
ASHBURY HEIGHTS OF CHILLICO	ОТНЕ		
603 ST LOUIS ST		<b>Telephone</b> (660) 707-1270	Alzheimer's Unit No
CHILLICOTHE	MO 64601-2438	Level of Care: RCF	Bed Capacity 12
Mailing Address 603 ST LOUIS ST		County LIVINGSTON	DMH Licensed Yes
CHILLICOTHE	MO 64601-2438	Region 4	Facility Number 23909
CHILLICOTHL	WIO 04001-2430	Kegion +	Facility Number 23909
ASHBURY HEIGHTS OF FAYETTE	2		
200 GROCE ST		<b>Telephone</b> (660) 248-3603	Alzheimer's Unit No
FAYETTE	MO 65248-9813	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 200 GROCE ST		County HOWARD	DMH Licensed No
FAYETTE	MO 65248-9813	Region 5	Facility Number 23894
ASHBURY HEIGHTS OF FULTON			
704 WEST CHESTNUT		<b>Telephone</b> (573) 642-2015	Alzheimer's Unit No
FULTON	MO 65251-1254	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 704 WEST CHESTN	UT	County CALLAWAY	DMH Licensed No
FULTON	MO 65251-1254	Region 6	Facility Number 23923
		region .	23723
ASHBURY HEIGHTS OF JEFFERSO	ON CITY		
834 WEATHERED ROCK COURT		<b>Telephone</b> (573) 634-7402	Alzheimer's Unit No
JEFFERSON CITY	MO 65101-1824	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 834 WEATHERED R	OCK COURT	County COLE	<b>DMH Licensed</b> No
JEFFERSON CITY	MO 65101-1824	Region 6	Facility Number 23936
ASHBURY HEIGHTS OF LAURIE			
299 HIGHWAY RA		<b>Telephone</b> (573) 374-0076	Alzheimer's Unit No
LAURIE	MO 65038-6024	Level of Care: RCF	Bed Capacity 12
Mailing Address 299 HIGHWAY RA		County MORGAN	DMH Licensed No
LAURIE	MO 65038-6024	Region 6	Facility Number 23915
		- Company	
ASHBURY HEIGHTS OF MONTGO	MERY CITY	Walankana (572) 554 5205	Alabaian VI to
625 WEST 2ND ST	NO (00(1.15(0)	<b>Telephone</b> (573) 564-3386	Alzheimer's Unit No
MONTGOMERY CITY	MO 63361-1762	Level of Care: RCF	Bed Capacity 12
Mailing Address 625 WEST 2ND ST	1.0	County MONTGOMERY	DMH Licensed No
MONTGOMERY CITY	MO 63361-1762	Region 6	Facility Number 20160

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ASHBURY HEIGHTS OF TIPTON 908 SOUTH PARK TIPTON	MO 65081-8408	Telephone (660) 433-6496 Level of Care: RCF	Alzheimer's Unit Bed Capacity	No 12
Mailing Address 908 SOUTH PARK		County MONITEAU	DMH Licensed	No
TIPTON	MO 65081-8408	Region 6	Facility Number	16506
ASHLAND HEALTHCARE				
300 SOUTH HENRY CLAY BLVD		<b>Telephone</b> (573) 657-2877	Alzheimer's Unit	No
ASHLAND	MO 65010-9438	Level of Care: SNF	Bed Capacity	60
Mailing Address 300 S HENRY CLAY		County BOONE	DMH Licensed	No
ASHLAND	MO 65010-9438	Region 6 Medicare/Medicaid	Facility Number	17908
ASHLAND VILLA - ASSISTED LIV	ING BY AMERICARE			
301 SOUTH HENRY CLAY BLVD		<b>Telephone</b> (573) 657-1920	Alzheimer's Unit	No
ASHLAND	MO 65010-9439	Level of Care: ALF**	Bed Capacity	72
Mailing Address 301 SOUTH HENRY		County BOONE	DMH Licensed	No
ASHLAND	MO 65010-9439	Region 6	Facility Number	20303
ASHLEY MANOR CARE CENTER				
1630 RADIO HILL RD		<b>Telephone</b> (660) 882-6584	Alzheimer's Unit	No
BOONVILLE	MO 65233-1957	Level of Care: SNF	Bed Capacity	52
Mailing Address 1630 RADIO HILL R		County COOPER	DMH Licensed	No
BOONVILLE	MO 65233-1957	Region 6 Medicare/Medicaid	Facility Number	00216
ASHTON COURT CARE AND REH	ABILITATION CENTRE			
1200 WEST COLLEGE ST		<b>Telephone</b> (816) 781-3020	Alzheimer's Unit	Yes
LIBERTY	MO 64068-1036	Level of Care: SNF	Bed Capacity	
	an am	G	= -	140
Mailing Address 1200 WEST COLLEG		County CLAY	DMH Licensed	No
LIBERTY	GE ST MO 64068-1036	County CLAY Region 4 Medicare/Medicaid	= -	
ASPIRE SENIOR LIVING ADVANCE	MO 64068-1036	Region 4 Medicare/Medicaid	DMH Licensed Facility Number	No 01961
ASPIRE SENIOR LIVING ADVANCE 315 SOUTH TILLEY ST	MO 64068-1036 CE	Region 4 Medicare/Medicaid  Telephone (573) 722-3440	DMH Licensed Facility Number Alzheimer's Unit	No 01961 No
ASPIRE SENIOR LIVING ADVANCE 315 SOUTH TILLEY ST ADVANCE	MO 64068-1036	Region 4 Medicare/Medicaid  Telephone (573) 722-3440 Level of Care: SNF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 01961 No 70
ASPIRE SENIOR LIVING ADVANCE  ADVANCE  Mailing Address 315 S TILLEY ST	MO 64068-1036  EE  MO 63730-7230	Region 4 Medicare/Medicaid  Telephone (573) 722-3440 Level of Care: SNF County STODDARD	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	No 01961 No 70 No
ASPIRE SENIOR LIVING ADVANCE 315 SOUTH TILLEY ST ADVANCE	MO 64068-1036 CE	Region 4 Medicare/Medicaid  Telephone (573) 722-3440 Level of Care: SNF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 01961 No 70
ASPIRE SENIOR LIVING ADVANCE  315 SOUTH TILLEY ST ADVANCE  Mailing Address 315 S TILLEY ST ADVANCE  ASPIRE SENIOR LIVING EAST PR	MO 64068-1036  EE  MO 63730-7230  MO 63730-7230	Region 4 Medicare/Medicaid  Telephone (573) 722-3440 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 01961 No 70 No 11722
ASPIRE SENIOR LIVING ADVANCE 315 SOUTH TILLEY ST ADVANCE Mailing Address 315 S TILLEY ST ADVANCE  ASPIRE SENIOR LIVING EAST PR 186 MILLAR RD	MO 64068-1036  EE  MO 63730-7230  MO 63730-7230	Region 4 Medicare/Medicaid  Telephone (573) 722-3440 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid  Telephone (573) 649-3551	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 01961 No 70 No 11722
ASPIRE SENIOR LIVING ADVANCE 315 SOUTH TILLEY ST ADVANCE Mailing Address 315 S TILLEY ST ADVANCE  ASPIRE SENIOR LIVING EAST PR 186 MILLAR RD EAST PRAIRIE	MO 64068-1036  EE  MO 63730-7230  MO 63730-7230	Region 4 Medicare/Medicaid  Telephone (573) 722-3440 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid  Telephone (573) 649-3551 Level of Care: SNF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 01961 No 70 No 11722
ASPIRE SENIOR LIVING ADVANCE  Mailing Address 315 S TILLEY ST ADVANCE  ASPIRE SENIOR LIVING EAST PR 186 MILLAR RD EAST PRAIRIE  Mailing Address PO BOX 299	MO 64068-1036  EE  MO 63730-7230  MO 63730-7230  AAIRIE  MO 63845-1180	Region 4 Medicare/Medicaid  Telephone (573) 722-3440 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid  Telephone (573) 649-3551 Level of Care: SNF County MISSISSIPPI	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	No 01961 No 70 No 11722 No 70
ASPIRE SENIOR LIVING ADVANCE 315 SOUTH TILLEY ST ADVANCE Mailing Address 315 S TILLEY ST ADVANCE  ASPIRE SENIOR LIVING EAST PR 186 MILLAR RD EAST PRAIRIE	MO 64068-1036  EE  MO 63730-7230  MO 63730-7230	Region 4 Medicare/Medicaid  Telephone (573) 722-3440 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid  Telephone (573) 649-3551 Level of Care: SNF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 01961 No 70 No 11722
ASPIRE SENIOR LIVING ADVANCE  Mailing Address 315 S TILLEY ST ADVANCE  ASPIRE SENIOR LIVING EAST PR 186 MILLAR RD EAST PRAIRIE  Mailing Address PO BOX 299 EAST PRAIRIE  ASPIRE SENIOR LIVING FAYETT	MO 64068-1036  EE  MO 63730-7230  MO 63730-7230  AIRIE  MO 63845-1180  MO 63845-0299	Region 4 Medicare/Medicaid  Telephone (573) 722-3440 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid  Telephone (573) 649-3551 Level of Care: SNF County MISSISSIPPI Region 2 Medicare/Medicaid	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 01961 No 70 No 11722 No 70 No 12083
ASPIRE SENIOR LIVING ADVANCE Mailing Address 315 S TILLEY ST ADVANCE  ASPIRE SENIOR LIVING EAST PR 186 MILLAR RD EAST PRAIRIE Mailing Address PO BOX 299 EAST PRAIRIE  ASPIRE SENIOR LIVING FAYETT 501 SOUTH PARK	MO 64068-1036  EE  MO 63730-7230  MO 63730-7230  AIRIE  MO 63845-1180  MO 63845-0299	Region 4 Medicare/Medicaid  Telephone (573) 722-3440 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid  Telephone (573) 649-3551 Level of Care: SNF County MISSISSIPPI Region 2 Medicare/Medicaid  Telephone (660) 248-3371	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 01961 No 70 No 11722 No 70 No 12083
ASPIRE SENIOR LIVING ADVANCE  Mailing Address 315 S TILLEY ST ADVANCE  ASPIRE SENIOR LIVING EAST PR 186 MILLAR RD EAST PRAIRIE  Mailing Address PO BOX 299 EAST PRAIRIE  ASPIRE SENIOR LIVING FAYETT 501 SOUTH PARK FAYETTE	MO 64068-1036  EE  MO 63730-7230  MO 63730-7230  AIRIE  MO 63845-1180  MO 63845-0299	Region 4 Medicare/Medicaid  Telephone (573) 722-3440 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid  Telephone (573) 649-3551 Level of Care: SNF County MISSISSIPPI Region 2 Medicare/Medicaid  Telephone (660) 248-3371 Level of Care: SNF	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 01961 No 70 No 11722 No 70 No 12083
ASPIRE SENIOR LIVING ADVANCE Mailing Address 315 S TILLEY ST ADVANCE  ASPIRE SENIOR LIVING EAST PR 186 MILLAR RD EAST PRAIRIE Mailing Address PO BOX 299 EAST PRAIRIE  ASPIRE SENIOR LIVING FAYETT 501 SOUTH PARK	MO 64068-1036  EE  MO 63730-7230  MO 63730-7230  AIRIE  MO 63845-1180  MO 63845-0299	Region 4 Medicare/Medicaid  Telephone (573) 722-3440 Level of Care: SNF County STODDARD Region 2 Medicare/Medicaid  Telephone (573) 649-3551 Level of Care: SNF County MISSISSIPPI Region 2 Medicare/Medicaid  Telephone (660) 248-3371	DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 01961 No 70 No 11722 No 70 No 12083

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ACRIDE CENTOR I WING CERAL			
ASPIRE SENIOR LIVING GERALI 533 CANAAN ROAD	,	<b>Telephone</b> (573) 764-2135	Alzheimer's Unit No
GERALD	MO 63037-2515	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 180	333 3337, 2515	County FRANKLIN	DMH Licensed No
GERALD	MO 63037-0180	Region 6 Medicare/Medicaid	Facility Number 13926
		Tiogram - Michigan - M	
ASPIRE SENIOR LIVING JONESB	URG		
308 CEDAR AVE		<b>Telephone</b> (636) 488-5400	Alzheimer's Unit Yes
JONESBURG	MO 63351-1126	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address PO BOX 218		County MONTGOMERY	DMH Licensed No
JONESBURG	MO 63351-0218	Region 6 Medicare/Medicaid	Facility Number 13265
ASPIRE SENIOR LIVING MALDER 1209 STOKELAN	N	<b>Telephone</b> (573) 276-5115	Alzheimer's Unit Yes
MALDEN	MO 63863-1335	Level of Care: SNF	Bed Capacity 70
Mailing Address 1209 STOKELAN	N10 03003 1333	County DUNKLIN	DMH Licensed No
MALDEN	MO 63863-1335	Region 2 Medicare/Medicaid	Facility Number 12465
	110 00000 1000	Region 2 Medicare/Medicard	12403
ASPIRE SENIOR LIVING MOBER	LY		
700 EAST URBANDALE DR		<b>Telephone</b> (660) 263-9060	Alzheimer's Unit Yes
MOBERLY	MO 65270-1966	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 700 EAST URBANI	DALE DR	County RANDOLPH	<b>DMH Licensed</b> No
MOBERLY	MO 65270-1966	Region 5 Medicare/Medicaid	Facility Number 12523
ASPIRE SENIOR LIVING PLATTE	CITY		
220 O'ROURKE DRIVE	MO (1070 0360	<b>Telephone</b> (816) 858-5222	Alzheimer's Unit No
PLATTE CITY  Mailing Address BO BOY 1210	MO 64079-9360	Level of Care: SNF	Bed Capacity 120
Mailing Address PO BOX 1310	MO 64079-1310	County PLATTE	DMH Licensed No
PLATTE CITY	MO 04079-1310	Region 4 Medicare/Medicaid	Facility Number 12655
ASSISTED LIVING AT CHARLESS	SVILLAGE		
5943 TELEGRAPH RD		<b>Telephone</b> (314) 846-2002	Alzheimer's Unit No
SAINT LOUIS	MO 63129-4715	Level of Care: ALF**	Bed Capacity 18
Mailing Address 5943 TELEGRAPH	RD	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63129-4715	Region 7	Facility Number 05586
Acciement i minici am mine accar	AOWII ANDC		
ASSISTED LIVING AT THE MEAD	OUWLANDS	T-1 (626) 078 2600	Al-hairmania Urrit Vas
135 MEADOWLANDS ESTATES LN O'FALLON	MO 63366-4591	Telephone (636) 978-3600 Level of Care: ALF**	Alzheimer's Unit Yes Bed Capacity 86
Mailing Address 135 MEADOWLAN			DMH Licensed No
O'FALLON	MO 63366-4591	County SAINT CHARLES  Region 5	Facility Number 26475
OFALLON	1120 03300-4371	region 2	racincy runiber 204/3
AUBURN CREEK - ASSISTED LIV	ING BY AMERICARE		
2910 BEAVER CREEK DR		<b>Telephone</b> (573) 651-0199	Alzheimer's Unit Yes
CAPE GIRARDEAU	MO 63701-1732	Level of Care: ALF	<b>Bed Capacity</b> 53
Mailing Address 2910 BEAVER CRE	EK DR	<b>County</b> CAPE GIRARDEAU	<b>DMH Licensed</b> No
CAPE GIRARDEAU	MO 63701-1732	Region 2	Facility Number 19892

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AUBURN RIDGE LIVING CENTER				
1425 ASHBURY WAY		<b>Telephone</b> (573) 634-2031	Alzheimer's Unit	No
WARDSVILLE	MO 65101-1007	Level of Care: RCF	Bed Capacity	24
Mailing Address 1425 ASHBURY WA		County COLE	DMH Licensed	No
WARDSVILLE	MO 65101-1007	Region 6	Facility Number	31832
A LIDOD A NUDCING CENTED				
AURORA NURSING CENTER 1700 SOUTH HUDSON AVE		Telephone (417) 678 2165	Alabaiman'a Unit	Yes
AURORA	MO 65605-2717	Telephone (417) 678-2165 Level of Care: SNF	Alzheimer's Unit	125
			Bed Capacity	No
Mailing Address 1700 S HUDSON AV AURORA	MO 65605-2717		DMH Licensed	
AURORA	WIO 03003-2/17	Region 1 Medicare/Medicaid	Facility Number	00234
AUTUMN OAKS CARING CENTER				
1310 HOVIS ST		<b>Telephone</b> (417) 926-5128	Alzheimer's Unit	Yes
MOUNTAIN GROVE	MO 65711-1219	Level of Care: SNF	Bed Capacity	120
Mailing Address 1310 HOVIS ST		County WRIGHT	DMH Licensed	No
MOUNTAIN GROVE	MO 65711-1219	Region 1 Medicare/Medicaid	Facility Number	07970
		8	v	
AUTUMN PLACE RESIDENTIAL C	ARE OF JOPLIN			
2030 E ZORA ST		<b>Telephone</b> (417) 626-8900	Alzheimer's Unit	No
JOPLIN	MO 64801-1170	Level of Care: RCF*	Bed Capacity	38
Mailing Address 2030 E ZORA ST		<b>County</b> JASPER	DMH Licensed	No
JOPLIN	MO 64801-1170	Region 1	Facility Number	20779
AUTUMN RIDGE RESIDENCES				
300 AUTUMN RIDGE DR		<b>Telephone</b> (636) 931-8400	Alzheimer's Unit	No
HERCULANEUM	MO 63048-1506	Level of Care: RCF*	Bed Capacity	81
Mailing Address 300 AUTUMN RIDG		County JEFFERSON	DMH Licensed	Yes
HERCULANEUM	MO 63048-1506	Region 2	Facility Number	15845
HERCOLANDOM	WIO 03040-1300	Region 2	racinty Number	13643
AUTUMN TERRACE HEALTH & R	EHABILITATION			
6124 RAYTOWN RD		<b>Telephone</b> (816) 358-8222	Alzheimer's Unit	Yes
RAYTOWN	MO 64133-4007	Level of Care: SNF	Bed Capacity	154
Mailing Address 6124 RAYTOWN RI	)	County JACKSON	DMH Licensed	No
RAYTOWN	MO 64133-4007	Region 3 Medicare/Medicaid	Facility Number	00768
A LIGHT AND WHEN A A PROPERTY				
AUTUMN VIEW GARDENS		m		1
16219 AUTUMN VIEW TERRACE DE		<b>Telephone</b> (636) 458-5225	Alzheimer's Unit	YES
ELLISVILLE	MO 63011-4743	Level of Care: ALF**	Bed Capacity	150
Mailing Address 16219 AUTUMN VII		County SAINT LOUIS COUNTY	DMH Licensed	Yes
ELLISVILLE	MO 63011-4743	Region 7	Facility Number	20751
AUTUMN VIEW GARDENS AT SCI	HUETZ ROAD			
11210 SCHUETZ RD		<b>Telephone</b> (314) 993-9888	Alzheimer's Unit	YES
SAINT LOUIS	MO 63146-4933	Level of Care: ALF**	Bed Capacity	100
Mailing Address 11210 SCHUETZ RI	)	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63146-4933	Region 7	Facility Number	22909

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AUTUMN WOODS, INC				
5500 NW HOUSTON LAKE DR		<b>Telephone</b> (816) 587-2263	Alzheimer's Unit	No
KANSAS CITY	MO 64151-3472	Level of Care: RCF*	Bed Capacity	28
Mailing Address PO BOX 12008	WO 04131-3472	County PLATTE	DMH Licensed	Yes
KANSAS CITY	MO 64152-0008	Region 4	Facility Number	10857
KANSAS CITT	1410 04132-0008	Region 4	Facility Number	10837
AVA PLACE				
1000 NW 3RD ST		<b>Telephone</b> (417) 683-6999	Alzheimer's Unit	No
AVA	MO 65608-1269	Level of Care: RCF*	Bed Capacity	40
Mailing Address PO BOX 1269		County DOUGLAS	DMH Licensed	Yes
AVA	MO 65608-1269	Region 1	Facility Number	20718
AVALON GARDEN				
4359 TAFT AVE		<b>Telephone</b> (314) 752-2022	Alzheimer's Unit	No
SAINT LOUIS	MO 63116-1533	Level of Care: SNF	Bed Capacity	77
Mailing Address 4359 TAFT AVE	WO 03110 1333	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63116-1533	Region 7 Medicare/Medicaid	Facility Number	00244
SAIRVI EOOIS	MO 03110 1333	Region / Wedicare/Medicard	Tacinty (value)	00244
AVALON MEMORY CARE				
5342 BUTLER HILL ROAD		<b>Telephone</b> (314) 849-2985	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63128-4152	Level of Care: ALF**	Bed Capacity	30
Mailing Address 5342 BUTLER HILL	ROAD	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63128-4152	Region 7	Facility Number	30425
BAILEY STREET RESIDENTIAL C	ARE I			
102 BAILEY ST		<b>Telephone</b> (573) 756-6374	Alzheimer's Unit	No
FARMINGTON	MO 63640-1819	Level of Care: RCF	Bed Capacity	12
Mailing Address 102 BAILEY ST	NG 03010 1019	County SAINT FRANCOIS	DMH Licensed	Yes
FARMINGTON	MO 63640-1819	Region 2	Facility Number	00256
BAISCH NURSING CENTER				
3260 BAISCH DR		<b>Telephone</b> (636) 586-2291	Alzheimer's Unit	No
DE SOTO	MO 63020-5046	Level of Care: RCF*	Bed Capacity	18
Mailing Address 3260 BAISCH DR		County JEFFERSON	DMH Licensed	No
DE SOTO	MO 63020-5046	Region 2	Facility Number	00910
BAISCH NURSING CENTER				
3260 BAISCH DR		<b>Telephone</b> (636) 586-2291	Alzheimer's Unit	No
DE SOTO	MO 63020-5046	Level of Care: SNF	<b>Bed Capacity</b>	61
Mailing Address 3260 BAISCH DR		County JEFFERSON	DMH Licensed	No
DE SOTO	MO 63020-5046	Region 2 Medicare/Medicaid	Facility Number	00910
BALLWIN RIDGE HEALTH & REF	IARILITATION			
1441 CHARIC DR		<b>Telephone</b> (636) 394-2522	Alzheimer's Unit	No
WILDWOOD	MO 63021-2001	Level of Care: SNF	Bed Capacity	66
Mailing Address 1441 CHARIC DR		County SAINT LOUIS COUNTY	DMH Licensed	No
				1.0

Medicare/Medicaid

**Facility Number** 

17887

MO 63021-2001

WILDWOOD

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BAPTIST HOME, THE		(572) 546 7400	ALL COLUMN AT MARKET ST
101 RIGGS-SCOTT LN	MO (2(50 4220	<b>Telephone</b> (573) 546-7429	Alzheimer's Unit No
IRONTON Mailing Address DO DOV 97	MO 63650-4338	Level of Care: SNF County IRON	Bed Capacity 3  DMH Licensed No
Mailing Address PO BOX 87 IRONTON	MO 63650-0087	•	Facility Number 00274
IKONTON	WO 03030-0087	Region 2	Facility Number 002/4
BAPTIST HOME, THE			
1625 WEST GARTON RD		<b>Telephone</b> (417) 581-2101	Alzheimer's Unit No
OZARK	MO 65721-6637	Level of Care: ALF**	<b>Bed Capacity</b> 30
Mailing Address PO BOX 1040		County CHRISTIAN	DMH Licensed No
OZARK	MO 65721-1040	Region 1	Facility Number 21509
BAPTIST HOME, THE			
101 RIGGS-SCOTT LN		<b>Telephone</b> (573) 546-7429	Alzheimer's Unit No
IRONTON	MO 63650-4338	Level of Care: ALF	Bed Capacity 56
Mailing Address PO BOX 87	1110 03030 1330	County IRON	DMH Licensed No
IRONTON	MO 63650-0087	Region 2	Facility Number 00274
		region -	233223, 2322232
BAPTIST HOME, THE			
500 BAPTIST HOME LN		<b>Telephone</b> (660) 646-6219	Alzheimer's Unit No
CHILLICOTHE	MO 64601-3973	Level of Care: ICF	<b>Bed Capacity</b> 34
Mailing Address 500 BAPTIST HOMI		County LIVINGSTON	<b>DMH Licensed</b> No
CHILLICOTHE	MO 64601-3973	Region 4	Facility Number 14084
BAPTIST HOME, THE			
101 RIGGS-SCOTT LN		<b>Telephone</b> (573) 546-7429	Alzheimer's Unit No
IRONTON	MO 63650-4338	Level of Care: ICF	Bed Capacity 53
Mailing Address PO BOX 87		County IRON	DMH Licensed No
IRONTON	MO 63650-0087	Region 2	Facility Number 00274
BAPTIST HOME, THE			
1625 WEST GARTON RD		<b>Telephone</b> (417) 581-2101	Alzheimer's Unit No
OZARK	MO 65721-6637	Level of Care: ICF	<b>Bed Capacity</b> 33
Mailing Address PO BOX 1040		County CHRISTIAN	DMH Licensed No
OZARK	MO 65721-1040	Region 1	Facility Number 21509
BAPTIST HOME, THE			
500 BAPTIST HOME LN		<b>Telephone</b> (660) 646-6219	Alzheimer's Unit No
CHILLICOTHE	MO 64601-3973	Level of Care: ALF**	Bed Capacity 20
Mailing Address 500 BAPTIST HOM		County LIVINGSTON	DMH Licensed No
CHILLICOTHE	MO 64601-3973	Region 4	Facility Number 14084
DADTICT HOMES OF INDEPENDE	NCE		
BAPTIST HOMES OF INDEPENDE 17451 MEDICAL CENTER PARKWA		<b>Telephone</b> (816) 373-7795	Alzheimer's Unit No
INDEPENDENCE	MO 64057-1805	Level of Care: SNF	Bed Capacity 118
Mailing Address 17451 MEDICAL CH		County JACKSON	DMH Licensed No
DEPENDENCE	340 64057 1005		

Medicare/Medicaid

**Facility Number** 

03782

MO 64057-1805

INDEPENDENCE

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BAPTIST HOMES OF INDEPENDENCE	CE			
17451 MEDICAL CENTER PARKWAY		<b>Telephone</b> (816) 373-7795	Alzheimer's Unit	NO
	MO 64057-1805	Level of Care: RCF	Bed Capacity	20
Mailing Address 17451 MEDICAL CENT		County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64057-1805	Region 3	Facility Number	03782
BARATHAVEN ALZHEIMER'S SPEC	TIAL CARE CENTER			
1030 BARATHAVEN DR		<b>Telephone</b> (636) 329-9160	Alzheimer's Unit	Yes
	MO 63368-8606	Level of Care: ALF**	Bed Capacity	66
Mailing Address 1030 BARATHAVEN I		County SAINT CHARLES	DMH Licensed	No
DARDENNE PRAIRIE	MO 63368-8606	Region 5	Facility Number	26902
DADNADAC ACDEC				
BARNABAS ACRES 210 FRANKS LN		<b>Telephone</b> (573) 334-7679	Alzheimer's Unit	No
	MO 63701-8439	Level of Care: ALF	Bed Capacity	56
Mailing Address 210 FRANKS LN	WIO 03701-0437	County CAPE GIRARDEAU	DMH Licensed	Yes
•	MO 63701-8439	Region 2	Facility Number	05130
CAI E GINANDEAU	WIO 03701-0437	Region 2	racinty Number	03130
BARNABAS HOME, THE				
1301 MONROE ST		<b>Telephone</b> (660) 646-5180	Alzheimer's Unit	No
CHILLICOTHE	MO 64601-1345	Level of Care: RCF*	Bed Capacity	64
Mailing Address 1301 MONROE ST		County LIVINGSTON	DMH Licensed	Yes
_	MO 64601-1345	Region 4	Facility Number	04632
			·	
BARNABAS REDWOOD MANOR				
1194 LANDON RD		<b>Telephone</b> (573) 468-8150	Alzheimer's Unit	No
BOURBON	MO 65441-8218	Level of Care: RCF	Bed Capacity	47
Mailing Address 1194 LANDON RD		County CRAWFORD	DMH Licensed	Yes
BOURBON	MO 65441-8218	Region 6	Facility Number	08609
BARNES-JEWISH EXTENDED CARE 401 CORPORATE PARK DR		<b>Telephone</b> (314) 725-7447	Alzheimer's Unit	Ma
	MO 62105 4201	` ′		No
	MO 63105-4201		Bed Capacity	120
Mailing Address 401 CORPORATE PAR SAINT LOUIS	MO 63105-4201	County SAINT LOUIS COUNTY	DMH Licensed Facility Number	No
SAINI LOUIS	WIO 03103-4201	Region 7 Medicare/Medicaid	racmty Number	15878
BAYLESS BOARDING HOME				
3719 SAND CREEK ROAD		<b>Telephone</b> (573) 747-0889	Alzheimer's Unit	No
FARMINGTON	MO 63640-7349	Level of Care: RCF	Bed Capacity	12
Mailing Address 3719 SAND CREEK RI	D	County SAINT FRANCOIS	DMH Licensed	Yes
•	MO 63640-7349	Region 2	Facility Number	17300
BEACON HILL RESIDENTIAL CARE		Tolonhous (016) 521 5150	Alaboiness!- II '	N.T
2905 CAMPBELL	MO 64100 1417	Telephone (816) 531-6168	Alzheimer's Unit	No
	MO 64109-1417	Level of Care: RCF*	Bed Capacity DMH Licensed	37 <b>V</b> oc
Mailing Address 2905 CAMPBELL	MO 64100 1417	County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64109-1417	Region 3	Facility Number	00329

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BEAUTIFUL SAVIOR HOME 1003 SOUTH CEDAR ST		<b>Telephone</b> (816) 331-0781	Alzheimer's Unit No
BELTON	MO 64012-3703	Level of Care: ALF	Bed Capacity 55
Mailing Address 1003 S CEDAR ST	1410 04012-3703	County CASS	DMH Licensed No
BELTON	MO 64012 2702		
BELION	MO 64012-3703	Region 3	Facility Number 00342
BEAUTIFUL SAVIOR HOME			
1003 SOUTH CEDAR ST		<b>Telephone</b> (816) 331-0781	Alzheimer's Unit No
BELTON	MO 64012-3703	Level of Care: SNF	Bed Capacity 126
Mailing Address 1003 S CEDAR ST		County CASS	DMH Licensed No
BELTON	MO 64012-3703	Region 3 Medicare/Medicaid	Facility Number 00342
BEAUVAIS REHAB AND HEALTHO	CARE CENTER		
3625 MAGNOLIA AVE		<b>Telephone</b> (314) 771-2990	Alzheimer's Unit Yes
SAINT LOUIS	MO 63110-4048	Level of Care: SNF	Bed Capacity 184
Mailing Address 3625 MAGNOLIA AV	VE	County SAINT LOUIS CITY	DMH Licensed No
SAINT LOUIS	MO 63110-4048	Region 7 Medicare/Medicaid	Facility Number 09528
BELLEFONTAINE GARDENS NURS	SING & REHAB		
9500 BELLEFONTAINE RD		<b>Telephone</b> (314) 388-0796	Alzheimer's Unit No
SAINT LOUIS	MO 63137-1336	Level of Care: SNF	Bed Capacity 96
Mailing Address 9500 BELLEFONTAI		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63137-1336	Region 7 Medicare/Medicaid	Facility Number 02598
SARVI EOOIS	110 03137 1330	region / Wedicare/Medicard	racinty Number 02378
BELLEVIEW VALLEY NURSING H	OME		
23144 HIGHWAY 32		<b>Telephone</b> (573) 697-5311	Alzheimer's Unit No
BELLEVIEW	MO 63623-6346	Level of Care: SNF	<b>Bed Capacity</b> 122
Mailing Address 23144 HIGHWAY 32		County IRON	<b>DMH Licensed</b> No
BELLEVIEW	MO 63623-6346	Region 2 Medicare/Medicaid	Facility Number 00382
BENEDICT JOSEPH LABRE CENTI	ER		
3863 CLEVELAND		<b>Telephone</b> (314) 664-3927	Alzheimer's Unit No
SAINT LOUIS	MO 63110-4009	Level of Care: RCF	Bed Capacity 15
Mailing Address 3863 CLEVELAND		County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63110-4009	Region 7	Facility Number 21163
BENTLEYS EXTENDED CARE			
3060 ASHBY ROAD		<b>Telephone</b> (314) 426-0433	Alzheimer's Unit No
OVERLAND	MO 63114-1342	Level of Care: SNF	<b>Bed Capacity</b> 72
Mailing Address 3060 ASHBY RD		County SAINT LOUIS COUNTY	DMH Licensed No
OVERLAND	MO 63114-1342	Region 7 Medicare/Medicaid	Facility Number 22613
BENTON HOUSE OF BLUE SPRING	SS		
1701 NW JEFFERSON ST		<b>Telephone</b> (816) 224-2727	Alzheimer's Unit Yes
BLUE SPRINGS	MO 64015-7229	Level of Care: ALF**	<b>Bed Capacity</b> 95
Mailing Address 1701 NW JEFFERSO	N ST	County JACKSON	DMH Licensed No
BLUE SPRINGS	MO 64015-7229	Region 3	Facility Number 29729

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DENITON HOUSE OF DAVIDOR				
BENTON HOUSE OF RAYMORE 2100 JOHNSTON DR	Tolonhono	(016) 222 2111	Alzheimer's Unit	Yes
RAYMORE MO 6408	Telephone 183-8122 Level of Care:	(816) 322-2111 ALF**	Bed Capacity	95
Mailing Address 2100 JOHNSTON DR	County CA		DMH Licensed	No
RAYMORE MO 6408	• • • • • • • • • • • • • • • • • • • •		Facility Number	29896
KATIMORE MO 0406	Kegion 3		racinty Number	29890
BENTON HOUSE OF STALEY HILLS				
11071 N WOODLAND AVE	Telephone	(816) 372-1888	Alzheimer's Unit	Yes
KANSAS CITY MO 641:	_		Bed Capacity	80
Mailing Address 11071 N WOODLAND AVE		AY	DMH Licensed	No
KANSAS CITY MO 641:	·		Facility Number	30774
	Region		2 womey 1 (umay 2	50771
BENTON HOUSE OF TIFFANY SPRINGS				
5901 NW 88TH ST	Telephone	(816) 505-4555	Alzheimer's Unit	Yes
KANSAS CITY MO 641:	54-1607 Level of Care:	ALF**	<b>Bed Capacity</b>	80
Mailing Address 5901 NW 88TH ST	County PL.	ATTE	DMH Licensed	No
KANSAS CITY MO 641:	54-1607 <b>Region</b> 4		Facility Number	29519
DENTINO OF MURCINIC A STATE				
BENTWOOD NURSING & REHAB	m., .	(21.1) 021 2700		
1501 CHARBONIER RD	Telephone	(314) 921-2700	Alzheimer's Unit	No
FLORISSANT MO 6300		SNF	Bed Capacity	116
Mailing Address 1501 CHARBONIER RD		INT LOUIS COUNTY	DMH Licensed	No
FLORISSANT MO 6303	31-5308 <b>Region</b> 7	Medicare/Medicaid	Facility Number	14817
BERNARD CARE CENTER				
4335 WEST PINE BLVD	Telephone	(314) 371-0200	Alzheimer's Unit	No
SAINT LOUIS MO 6310	08-2205 Level of Care:	SNF	<b>Bed Capacity</b>	141
Mailing Address 4335 WEST PINE BLVD	County SA	INT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO 6310	08-2205 <b>Region</b> 7	Medicare/Medicaid	<b>Facility Number</b>	00436
BERTRAND NURSING AND REHAB CENTER	,			
603 WEST HIGHWAY 62	Telephone	(573) 683-4290	Alzheimer's Unit	No
BERTRAND MO 638:	•		Bed Capacity	60
Mailing Address 603 WEST HIGHWAY 62		SSISSIPPI	DMH Licensed	No
BERTRAND MO 6382		Medicare/Medicaid	Facility Number	00440
	Ü			
BETH HAVEN NURSING HOME				
2500 PLEASANT ST	Telephone	(573) 221-6000	Alzheimer's Unit	Yes
HANNIBAL MO 6340			<b>Bed Capacity</b>	105
Mailing Address 2500 PLEASANT ST	·	ARION	DMH Licensed	No
HANNIBAL MO 6340	01-2600 <b>Region</b> 5	Medicare/Medicaid	Facility Number	00469
BETHESDA DILWORTH				
9645 BIG BEND BLVD	Telephone	(314) 968-5460	Alzheimer's Unit	Yes
SAINT LOUIS MO 6312	22-6521 Level of Care:		<b>Bed Capacity</b>	400
Mailing Address 9645 BIG BEND BLVD	County SA	INT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS MO 6312	22-6521 <b>Region</b> 7	Medicare/Medicaid	<b>Facility Number</b>	00508

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BETHESDA HAWTHORNE PLACE				
1111 SOUTH BERRY ROAD		<b>Telephone</b> (314) 942-5750	Alzheimer's Unit	Yes
SAINT LOUIS M	IO 63122-6598	Level of Care: ALF**	Bed Capacity	66
Mailing Address 1111 SOUTH BERRY RO	OAD	County SAINT LOUIS COUNTY	DMH Licensed	No
	IO 63122-6598	Region 7	Facility Number	30509
			v	
BETHESDA MEADOW				
322 OLD STATE ROAD		<b>Telephone</b> (636) 227-3431	Alzheimer's Unit	Yes
ELLISVILLE	IO 63021-5917	Level of Care: SNF	Bed Capacity	210
Mailing Address 322 OLD STATE ROAD		County SAINT LOUIS COUNTY	DMH Licensed	No
ELLISVILLE M	IO 63021-5917	Region 7 Medicare/Medicaid	Facility Number	15226
BETHESDA SOUTHGATE 5943 TELEGRAPH RD		<b>Telephone</b> (314) 846-2000	Alzheimer's Unit	Yes
	IO 63129-4715	Level of Care: SNF	Bed Capacity	192
Mailing Address 5943 TELEGRAPH RD	10 03129-4713	County SAINT LOUIS COUNTY	DMH Licensed	No
· ·	IO 63129-4715	Region 7 Medicare/Medicaid	Facility Number	
SAINI LOUIS IV	10 03129-4713	Region / Medicare/Medicaid	racinty Number	05586
BIG BEND RETREAT				
620 NORTH EMMERSON		<b>Telephone</b> (660) 529-2237	Alzheimer's Unit	No
	IO 65349-1157	Level of Care: ICF	Bed Capacity	60
Mailing Address 620 NORTH EMMERSO		County SALINE	DMH Licensed	No
	IO 65349-1157	Region 5	Facility Number	00546
		Region 5	1 401109 1 (4111001	005 10
BIG BEND RETREAT				
620 NORTH EMMERSON		<b>Telephone</b> (660) 529-2237	Alzheimer's Unit	No
SLATER M	IO 65349-1157	Level of Care: RCF*	<b>Bed Capacity</b>	10
Mailing Address 620 NORTH EMMERSO	N	County SALINE	DMH Licensed	No
SLATER M	IO 65349-1157	Region 5	Facility Number	00546
BIG BEND WOODS HEALTHCARE CE	ENTER	Tolonhous (626) 225 5144	Alzheimer's Unit	No
110 HIGHLAND AVE	IO 62000 1422	<b>Telephone</b> (636) 225-5144		No
	IO 63088-1422	Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity  DMH Licensed	135
Mailing Address 110 HIGHLAND AVE	10 62000 1422	•		No
VALLEY PARK N	IO 63088-1422	Region 7 Medicare/Medicaid	Facility Number	01170
BIG PRAIRIE ASSISTED LIVING, LLC				
411 NORTH KINGSHIGHWAY		<b>Telephone</b> (573) 471-5503	Alzheimer's Unit	No
SIKESTON M	1O 63801-	Level of Care: ALF	Bed Capacity	36
Mailing Address PO BOX 909		County SCOTT	DMH Licensed	Yes
	1O 63801-0909	Region 2	Facility Number	03229
DIC DIVIED MUDCING A DEWAR				
BIG RIVER NURSING & REHAB		T-l-nh (626) 274 1777	Allahataan U.T. M	37
6400 THE CEDARS COURT	IO 62016 2220	Telephone (636) 274-1777	Alzheimer's Unit	Yes
	IO 63016-2220	Level of Care: SNF	Bed Capacity	150 No.
Mailing Address 6400 THE CEDARS CT		County JEFFERSON	DMH Licensed	No

Medicare/Medicaid

**Facility Number** 

12647

MO 63016-2220

CEDAR HILL

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BIG SPRING CARE CENTER FOR I	REHAB AND HEALTHCARE			
202 EAST MILL ST		<b>Telephone</b> (417) 754-8711	Alzheimer's Unit	No
HUMANSVILLE	MO 65674-8507	Level of Care: SNF	<b>Bed Capacity</b>	60
Mailing Address 202 EAST MILL ST		County POLK	DMH Licensed	No
HUMANSVILLE	MO 65674-8507	Region 1 Medicare/Medicaid	<b>Facility Number</b>	18672
BIRCH POINTE HEALTH AND REF	HABILITATION			
3705 S JEFFERSON AVE		<b>Telephone</b> (417) 889-0773	Alzheimer's Unit	Yes
SPRINGFIELD	MO 65807-5880	Level of Care: SNF	Bed Capacity	120
Mailing Address 3705 S JEFFERSON A		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65807-5880	Region 1 Medicare/Medicaid	Facility Number	31013
SI KINGI ILLD	MO 03007-3000	Region 1 Medicare/Medicaid	racinty Number	31013
DICHOD CDENCED DI ACE INC TI	IE			
BISHOP SPENCER PLACE, INC, TE 4301 MADISON AVE	1E	<b>Telephone</b> (816) 931-4277	Alzheimer's Unit	No
	MO (4111 2401			
KANSAS CITY	MO 64111-3491	Level of Care: SNF	Bed Capacity	57 N
Mailing Address 4301 MADISON AVE		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64111-3491	Region 3 Medicare/Medicaid	Facility Number	20635
DIGHOD CDENICED DI ACCUMANA	IE.			
BISHOP SPENCER PLACE, INC, TH	iE	(016) 001 4077		
4301 MADISON AVE		<b>Telephone</b> (816) 931-4277	Alzheimer's Unit	No
KANSAS CITY	MO 64111-3491	Level of Care: ALF**	Bed Capacity	40
Mailing Address 4301 MADISON AVE		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64111-3491	Region 3	Facility Number	20635
DI EGGED HOMEG				
BLESSED HOMES		T. I. 1 (016) 670 0061	A1 1	NT
305 E 63RD ST	NO. 64110 2005	<b>Telephone</b> (816) 678-8061	Alzheimer's Unit	No
KANSAS CITY	MO 64113-2225	Level of Care: RCF	Bed Capacity	11
Mailing Address 305 E 63RD ST		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64113-2225	Region 3	Facility Number	27175
DI ECCINO CENTED THE				
BLESSING CENTER, THE 302 NORTH MAIN		<b>Telephone</b> (660) 397-2293	Alzheimer's Unit	No
	MO (2527 1252	• , ,		
EDINA	MO 63537-1353	Level of Care: RCF*	Bed Capacity	51
Mailing Address 302 NORTH MAIN	MO (2527 1252	County KNOX	DMH Licensed	Yes
EDINA	MO 63537-1353	Region 5	Facility Number	03728
BLOOMFIELD LIVING CENTER				
606 WEST MISSOURI ST		<b>Telephone</b> (573) 568-2137	Alzheimer's Unit	No
BLOOMFIELD	MO 63825-9706	Level of Care: SNF	Bed Capacity	60
Mailing Address 606 WEST MISSOUR		County STODDARD	DMH Licensed	No
•		•		
BLOOMFIELD	MO 63825-9706	Region 2 Medicare/Medicaid	Facility Number	00629
BLUE CASTLE LLC				
1830 E LAVERNE ST		<b>Telephone</b> (417) 777-2583	Alzheimer's Unit	No
BOLIVAR	MO 65613-1488	Level of Care: RCF*	Bed Capacity	30
Mailing Address 1830 E LAVERNE ST		County POLK	DMH Licensed	Yes
BOLIVAR	MO 65613-1488	Region 1	Facility Number	24698
DOLLINIK	11.0 03013 1700	region 1	racincy muniber	24070

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BLUE CIRCLE REHAB AND NURSING	m	
2939 MAGAZINE STREET	<b>Telephone</b> (314) 531-0500	Alzheimer's Unit No
SAINT LOUIS MO 63106-1245	Level of Care: SNF	Bed Capacity 90
Mailing Address 2939 MAGAZINE STREET	County SAINT LOUIS CITY	<b>DMH Licensed</b> No
SAINT LOUIS MO 63106-1245	Region 7 Medicare/Medicaid	Facility Number 15258
BLUE HILLS REST HOME, INC		
2207 NORTH BLUE MILLS RD	<b>Telephone</b> (816) 796-3376	Alzheimer's Unit No
INDEPENDENCE MO 64058-2022	Level of Care: ALF**	Bed Capacity 63
Mailing Address 2207 N BLUE MILLS RD	County JACKSON	DMH Licensed No
INDEPENDENCE MO 64058-2022	Region 3	Facility Number 11146
1.00.00.00.00.00.00.00.00.00.00.00.00.00	Region 5	Tuenty Number
BLUEGRASS TERRACE		
102 REDTAIL DR	<b>Telephone</b> (573) 657-0899	Alzheimer's Unit No
ASHLAND MO 65010-1179	Level of Care: RCF	<b>Bed Capacity</b> 16
Mailing Address 102 REDTAIL DR	<b>County</b> BOONE	DMH Licensed No
ASHLAND MO 65010-1179	Region 6	Facility Number 25731
BI HEE CHEEK TERRACE ACCORDED A WAY CAN AN	TEDICA DE	
BLUFF CREEK TERRACE - ASSISTED LIVING BY AM 3104 BLUFF CREEK DR		A11
COLUMBIA MO 65201-3524	Telephone (573) 815-9111  Level of Care: ALF**	Alzheimer's Unit Yes Bed Capacity 48
Mailing Address 3104 BLUFF CREEK DR COLUMBIA MO 65201-3524	5.5.5.5.5	DMH Licensed No
COLUMBIA MO 03201-3324	Region 6	Facility Number 20625
BLUFFS, THE		
3105 BLUFF CREEK DR	<b>Telephone</b> (573) 442-6060	Alzheimer's Unit Yes
COLUMBIA MO 65201-3529	Level of Care: SNF	Bed Capacity 132
Mailing Address 3105 BLUFF CREEK DR	<b>County</b> BOONE	<b>DMH Licensed</b> No
COLUMBIA MO 65201-3529	Region 6 Medicare/Medicaid	Facility Number 00754
BOARDING INN, THE		
9444 MIDLAND BLVD	<b>Telephone</b> (314) 426-0091	Alzheimer's Unit No
OVERLAND MO 63114-3328	Level of Care: RCF	Bed Capacity 40
Mailing Address 9444 MIDLAND BLVD	County SAINT LOUIS COUNTY	DMH Licensed Yes
OVERLAND MO 63114-3328	Region 7	Facility Number 00709
	Acquir	- 11-11-1
BOLIVAR MANOR HOUSE		
404 EAST BROADWAY	<b>Telephone</b> (417) 326-7873	Alzheimer's Unit No
BOLIVAR MO 65613-2019	<b>Level of Care:</b> RCF*	<b>Bed Capacity</b> 20
Mailing Address PO BOX 175	County POLK	<b>DMH Licensed</b> Yes
BOLIVAR MO 65613-0175	Region 1	Facility Number 04529
BOULEVARD SENIOR LIVING OF ST CHARLES		
3340 EHLMANN ROAD	<b>Telephone</b> (636) 757-5077	Alzheimer's Unit Yes
SAINT CHARLES MO 63301-4087	Level of Care: ALF**	Bed Capacity 128
Mailing Address 3340 EHLMANN ROAD	County SAINT CHARLES	DMH Licensed No
SAINT CHARLES MO 63301-4087	Region 5	Facility Number 31029
	· ·	•

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BOULEVARD SENIOR LIVING OF	WENTZVILLE		
120 PERRY CATE BOULEVARD		<b>Telephone</b> (636) 698-9458	Alzheimer's Unit Yes
WENTZVILLE	MO 63385-4719	Level of Care: ALF**	<b>Bed Capacity</b> 62
Mailing Address 120 PERRY CATE B	OULEVARD	County SAINT CHARLES	DMH Licensed No
WENTZVILLE	MO 63385-4719	Region 5	Facility Number 31404
			·
BOWLING GREEN RESIDENTIAL	CARE		
119 WEST CENTENNIAL AVE	O. INC.	<b>Telephone</b> (573) 324-5560	Alzheimer's Unit No
BOWLING GREEN	MO 63334-1605	Level of Care: RCF*	Bed Capacity 25
Mailing Address 119 WEST CENTEN			DMH Licensed Yes
e e			
BOWLING GREEN	MO 63334-1605	Region 5	Facility Number 07712
BRADEORD COURT ACCIONED I	NUNC DV AMEDICADE		
BRADFORD COURT - ASSISTED LI	IVING BY AWEKICAKE	Tolonkono (417) 705 0177	Alahaiman'a Unit
902 NORTH MAIN	NO (5714 0204	<b>Telephone</b> (417) 725-0177	Alzheimer's Unit No
NIXA	MO 65714-9384	Level of Care: ALF**	Bed Capacity 50
Mailing Address 902 NORTH MAIN		County CHRISTIAN	<b>DMH Licensed</b> No
NIXA	MO 65714-9384	Region 1	Facility Number 17732
BRENT B TINNIN MANOR			
220 EUEL POLK DR		<b>Telephone</b> (573) 663-2545	Alzheimer's Unit No
ELLINGTON	MO 63638-7967	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address 220 EUEL POLK DR		County REYNOLDS	<b>DMH Licensed</b> No
ELLINGTON	MO 63638-7967	Region 2 Medicare/Medicaid	Facility Number 08027
BRENTMOOR RETIREMENT COM	IMUNITY		
8600 DELMAR BLVD		<b>Telephone</b> (314) 995-3811	Alzheimer's Unit No
SAINT LOUIS	MO 63124-1973	Level of Care: ALF**	<b>Bed Capacity</b> 36
Mailing Address 8600 DELMAR BLV	D	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63124-1973	Region 7	Facility Number 19968
BRIDGEWAY RESIDENTIAL CARE	E FACILITY		
828 JEFFERSON ST		<b>Telephone</b> (573) 642-7770	Alzheimer's Unit No
FULTON	MO 65251-1877	Level of Care: RCF*	<b>Bed Capacity</b> 94
Mailing Address 828 JEFFERSON ST		County CALLAWAY	<b>DMH Licensed</b> Yes
FULTON	MO 65251-1877	Region 6	Facility Number 13522
DDIDCEMOOD HEAT WAS CARE OF	NATED		
BRIDGEWOOD HEALTH CARE CE	NIEK		
11515 TROOST		<b>Telephone</b> (816) 943-0101	Alzheimer's Unit Yes
KANSAS CITY	MO 64131-3769	Level of Care: SNF	<b>Bed Capacity</b> 166
Mailing Address 11515 TROOST		County JACKSON	<b>DMH Licensed</b> No
KANSAS CITY	MO 64131-3769	Region 3 Medicare/Medicaid	Facility Number 06555
DDICTOL MANOD OF ATDORA			
BRISTOL MANOR OF AURORA		T-lk (417) (70 7525	Allahatan anta Tirata
740 SOUTH HUDSON	160 (5505 2512	<b>Telephone</b> (417) 678-7535	Alzheimer's Unit No
AURORA	MO 65605-2512	Level of Care: RCF	Bed Capacity 12
Mailing Address 740 SOUTH HUDSO		County LAWRENCE	DMH Licensed No
AURORA	MO 65605-2512	Region 1	Facility Number 20352

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BRISTOL MANOR OF BETHANY			
811 SOUTH 24TH ST		<b>Telephone</b> (660) 425-7133	Alzheimer's Unit No
BETHANY	MO 64424-2631	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 811 SOUTH 24TH ST		County HARRISON	<b>DMH Licensed</b> No
BETHANY	MO 64424-2631	Region 4	Facility Number 19068
BRISTOL MANOR OF BOONVILLE			
1290 ASHLEY RD		<b>Telephone</b> (660) 882-3393	Alzheimer's Unit No
BOONVILLE	MO 65233-2108	Level of Care: RCF	Bed Capacity 12
Mailing Address 1290 ASHLEY RD		County COOPER	DMH Licensed No
BOONVILLE	MO 65233-2108	Region 6	Facility Number 17310
DDICTOL MANOD OF DDOOVEIEL	D		
BRISTOL MANOR OF BROOKFIEL 338 THOMPSON	LD	<b>Telephone</b> (660) 258-5065	Alzheimer's Unit No
BROOKFIELD	MO 64628-2419	Level of Care: RCF	Bed Capacity 12
Mailing Address 338 THOMPSON	WIO 04028-2419	County LINN	DMH Licensed No
BROOKFIELD	MO 64628-2419	Region 5	Facility Number 18666
BROOKFIELD	WIO 04028-2419	Region 5	racinty Number 18000
BRISTOL MANOR OF BUFFALO			
1002 SOUTH BIRCH		<b>Telephone</b> (417) 345-5500	Alzheimer's Unit No
BUFFALO	MO 65622-9455	Level of Care: RCF	Bed Capacity 12
Mailing Address 1002 SOUTH BIRCH		County DALLAS	<b>DMH Licensed</b> No
BUFFALO	MO 65622-9455	Region 1	Facility Number 18142
BRISTOL MANOR OF BUTLER			
411 SOUTH DELAWARE		<b>Telephone</b> (660) 679-3661	Alzheimer's Unit No
BUTLER	MO 64730-2311	Level of Care: RCF	Bed Capacity 12
Mailing Address 411 S DELAWARE		C 4 DATEC	DMH Licensed No
DUTTED		County BATES	
BUTLER	MO 64730-2311	Region 3	Facility Number 18817
BUILER	MO 64730-2311	•	Facility Number 18817
		•	Facility Number 18817
BRISTOL MANOR OF CALIFORNI.		Region 3	·
BRISTOL MANOR OF CALIFORNIA 605 PARKVIEW DR	A	<b>Region</b> 3 <b>Telephone</b> (573) 796-4342	Alzheimer's Unit No
BRISTOL MANOR OF CALIFORNI 605 PARKVIEW DR CALIFORNIA		Region 3  Telephone (573) 796-4342 Level of Care: RCF	Alzheimer's Unit No Bed Capacity 12
BRISTOL MANOR OF CALIFORNIA 605 PARKVIEW DR	A	<b>Region</b> 3 <b>Telephone</b> (573) 796-4342	Alzheimer's Unit No Bed Capacity 12
BRISTOL MANOR OF CALIFORNI 605 PARKVIEW DR CALIFORNIA Mailing Address 605 PARKVIEW DR	<b>A</b> MO 65018-2001	Region 3  Telephone (573) 796-4342  Level of Care: RCF  County MONITEAU	Alzheimer's Unit No Bed Capacity 12 DMH Licensed No
BRISTOL MANOR OF CALIFORNIA 605 PARKVIEW DR CALIFORNIA Mailing Address 605 PARKVIEW DR CALIFORNIA	MO 65018-2001 MO 65018-2001	Region 3  Telephone (573) 796-4342  Level of Care: RCF  County MONITEAU	Alzheimer's Unit No Bed Capacity 12 DMH Licensed No
BRISTOL MANOR OF CALIFORNIA 605 PARKVIEW DR CALIFORNIA Mailing Address 605 PARKVIEW DR CALIFORNIA BRISTOL MANOR OF CAMDENTO	MO 65018-2001 MO 65018-2001	Region 3  Telephone (573) 796-4342  Level of Care: RCF  County MONITEAU  Region 6	Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 17401
BRISTOL MANOR OF CALIFORNIA 605 PARKVIEW DR CALIFORNIA Mailing Address 605 PARKVIEW DR CALIFORNIA  BRISTOL MANOR OF CAMDENTO 75 FOURTH ST	MO 65018-2001 MO 65018-2001	Region 3  Telephone (573) 796-4342 Level of Care: RCF County MONITEAU Region 6  Telephone (573) 346-6800	Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 17401  Alzheimer's Unit No
BRISTOL MANOR OF CALIFORNIA 605 PARKVIEW DR CALIFORNIA Mailing Address 605 PARKVIEW DR CALIFORNIA  BRISTOL MANOR OF CAMDENTO 75 FOURTH ST CAMDENTON	MO 65018-2001 MO 65018-2001	Region 3  Telephone (573) 796-4342 Level of Care: RCF County MONITEAU Region 6  Telephone (573) 346-6800 Level of Care: RCF	Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 17401  Alzheimer's Unit No Bed Capacity 12
BRISTOL MANOR OF CALIFORNIA 605 PARKVIEW DR CALIFORNIA Mailing Address 605 PARKVIEW DR CALIFORNIA  BRISTOL MANOR OF CAMDENTO 75 FOURTH ST CAMDENTON Mailing Address 75 FOURTH ST	MO 65018-2001 MO 65018-2001 N MO 65020-6891	Region 3  Telephone (573) 796-4342 Level of Care: RCF County MONITEAU Region 6  Telephone (573) 346-6800 Level of Care: RCF County CAMDEN	Alzheimer's Unit Bed Capacity 12 DMH Licensed No Facility Number 17401  Alzheimer's Unit Bed Capacity 12 DMH Licensed No
BRISTOL MANOR OF CALIFORNIA 605 PARKVIEW DR CALIFORNIA Mailing Address 605 PARKVIEW DR CALIFORNIA  BRISTOL MANOR OF CAMDENTO 75 FOURTH ST CAMDENTON	MO 65018-2001 MO 65018-2001	Region 3  Telephone (573) 796-4342 Level of Care: RCF County MONITEAU Region 6  Telephone (573) 346-6800 Level of Care: RCF	Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 17401  Alzheimer's Unit No Bed Capacity 12
BRISTOL MANOR OF CALIFORNIA 605 PARKVIEW DR CALIFORNIA Mailing Address 605 PARKVIEW DR CALIFORNIA  BRISTOL MANOR OF CAMDENTO 75 FOURTH ST CAMDENTON Mailing Address 75 FOURTH ST	MO 65018-2001 MO 65018-2001 N MO 65020-6891	Region 3  Telephone (573) 796-4342 Level of Care: RCF County MONITEAU Region 6  Telephone (573) 346-6800 Level of Care: RCF County CAMDEN	Alzheimer's Unit Bed Capacity 12 DMH Licensed No Facility Number 17401  Alzheimer's Unit Bed Capacity 12 DMH Licensed No
BRISTOL MANOR OF CALIFORNIA 605 PARKVIEW DR CALIFORNIA Mailing Address 605 PARKVIEW DR CALIFORNIA  BRISTOL MANOR OF CAMDENTO 75 FOURTH ST CAMDENTON Mailing Address 75 FOURTH ST CAMDENTON  BRISTOL MANOR OF CAMERON	MO 65018-2001 MO 65018-2001 N MO 65020-6891	Region 3  Telephone (573) 796-4342 Level of Care: RCF County MONITEAU Region 6  Telephone (573) 346-6800 Level of Care: RCF County CAMDEN Region 6	Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 17401  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 17914
BRISTOL MANOR OF CALIFORNIA 605 PARKVIEW DR CALIFORNIA Mailing Address 605 PARKVIEW DR CALIFORNIA  BRISTOL MANOR OF CAMDENTO 75 FOURTH ST CAMDENTON Mailing Address 75 FOURTH ST CAMDENTON  BRISTOL MANOR OF CAMERON 920 NORTH HARRIS	MO 65018-2001 MO 65018-2001 N MO 65020-6891 MO 65020-6891	Region 3  Telephone (573) 796-4342 Level of Care: RCF County MONITEAU Region 6  Telephone (573) 346-6800 Level of Care: RCF County CAMDEN Region 6  Telephone (816) 632-6133	Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 17401  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 17914
BRISTOL MANOR OF CALIFORNIA 605 PARKVIEW DR CALIFORNIA Mailing Address 605 PARKVIEW DR CALIFORNIA  BRISTOL MANOR OF CAMDENTO 75 FOURTH ST CAMDENTON Mailing Address 75 FOURTH ST CAMDENTON  BRISTOL MANOR OF CAMERON 920 NORTH HARRIS CAMERON	MO 65018-2001 MO 65018-2001  N MO 65020-6891 MO 65020-6891  MO 64429-1145	Region 3  Telephone (573) 796-4342 Level of Care: RCF County MONITEAU Region 6  Telephone (573) 346-6800 Level of Care: RCF County CAMDEN Region 6  Telephone (816) 632-6133 Level of Care: RCF	Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 17401  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 17914  Alzheimer's Unit No Bed Capacity 12
BRISTOL MANOR OF CALIFORNIA 605 PARKVIEW DR CALIFORNIA Mailing Address 605 PARKVIEW DR CALIFORNIA  BRISTOL MANOR OF CAMDENTO 75 FOURTH ST CAMDENTON Mailing Address 75 FOURTH ST CAMDENTON  BRISTOL MANOR OF CAMERON 920 NORTH HARRIS	MO 65018-2001 MO 65018-2001  N MO 65020-6891 MO 65020-6891  MO 64429-1145	Region 3  Telephone (573) 796-4342 Level of Care: RCF County MONITEAU Region 6  Telephone (573) 346-6800 Level of Care: RCF County CAMDEN Region 6  Telephone (816) 632-6133	Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 17401  Alzheimer's Unit No Bed Capacity 12 DMH Licensed No Facility Number 17914

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BRISTOL MANOR OF CARROLLTO	ON		
1016 EAST 10TH ST		<b>Telephone</b> (660) 542-2349	Alzheimer's Unit No
CARROLLTON	MO 64633-9348	Level of Care: RCF	Bed Capacity 12
Mailing Address 1016 EAST 10TH ST		County CARROLL	DMH Licensed No
CARROLLTON	MO 64633-9348	Region 4	Facility Number 18316
BRISTOL MANOR OF CARTHAGE			
2131 SOUTH RIVER AVE		<b>Telephone</b> (417) 358-9788	Alzheimer's Unit No
CARTHAGE	MO 64836-3350	Level of Care: RCF	
	MO 04830-3330		
Mailing Address 2131 S RIVER AVE	MO (402( 2250	·	
CARTHAGE	MO 64836-3350	Region 1	Facility Number 20858
BRISTOL MANOR OF CENTRALIA			
610 NORTH JEFFERSON ST		<b>Telephone</b> (573) 682-5913	Alzheimer's Unit No
CENTRALIA	MO 65240-1178	Level of Care: RCF	Bed Capacity 12
Mailing Address 610 NORTH JEFFER	SON ST	County BOONE	DMH Licensed No
CENTRALIA	MO 65240-1178	Region 6	Facility Number 18286
		S	
BRISTOL MANOR OF CLINTON		(660) 005 0001	
1402 EAST FRANKLIN	150 (1505 150)	<b>Telephone</b> (660) 885-8391	Alzheimer's Unit No
CLINTON	MO 64735-1768	Level of Care: RCF	Bed Capacity 12
Mailing Address 1402 EAST FRANKL		County HENRY	<b>DMH Licensed</b> No
CLINTON	MO 64735-1768	Region 1	Facility Number 16656
BRISTOL MANOR OF ELDON			
1201 EAST NORTH ST		<b>Telephone</b> (573) 392-1200	Alzheimer's Unit No
ELDON	MO 65026-2651	Level of Care: RCF	Bed Capacity 12
Mailing Address 1201 EAST NORTH S	ST	County MILLER	DMH Licensed No
ELDON	MO 65026-2651	Region 6	Facility Number 17701
BRISTOL MANOR OF ELSBERRY			
1402 RIVERVIEW DR		<b>Telephone</b> (573) 898-5955	Alzheimer's Unit No
ELSBERRY	MO 63343-1612	Level of Care: RCF	Bed Capacity 12
Mailing Address 1402 RIVERVIEW D		County LINCOLN	DMH Licensed No
ELSBERRY	MO 63343-1612	Region 5	Facility Number 20015
ELIBERRI	110 03343 1012	Region 5	racincy ramper 20013
BRISTOL MANOR OF FULTON			
750 SIGN PAINTER ROAD		<b>Telephone</b> (573) 642-7557	Alzheimer's Unit No
FULTON	MO 65251-2514	Level of Care: RCF	Bed Capacity 12
Mailing Address 750 SIGN PAINTER I	RD	County CALLAWAY	<b>DMH Licensed</b> No
FULTON	MO 65251-2514	Region 6	Facility Number 18575
BRISTOL MANOR OF HOLDEN			
501 WEST SECOND		<b>Telephone</b> (816) 732-6789	Alzheimer's Unit No
HOLDEN	MO 64040-1205	Level of Care: RCF	Bed Capacity 12
Mailing Address 501 WEST SECOND		County JOHNSON	DMH Licensed No
HOLDEN	MO 64040-1205	Region 3	Facility Number 17951
		-	

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BRISTOL MANOR OF JEFFERSON CITY				
510 KENSINGTON PARK		<b>Telephone</b> (573) 761-5772	Alzheimer's Unit No	)
JEFFERSON CITY MO	65109-6247	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 510 KENSINGTON PARK		County COLE	DMH Licensed No	)
JEFFERSON CITY MO	65109-6247	Region 6	Facility Number 20116	5
BRISTOL MANOR OF LAMAR				
603 EAST 17TH ST		<b>Telephone</b> (417) 682-6762	Alzheimer's Unit No	)
	64759-2303	Level of Care: RCF	Bed Capacity 12	
Mailing Address 603 EAST 17TH ST		County BARTON	DMH Licensed No	О
	64759-2303	Region 1	Facility Number 1895	
	01707 2000	Region 1	Tuemey Number 1093.	L
BRISTOL MANOR OF LEXINGTON				
2615 MAIN ST		<b>Telephone</b> (660) 259-6655	Alzheimer's Unit No	
	64067-1974	Level of Care: RCF	Bed Capacity 12	
Mailing Address 2615 MAIN ST		County LAFAYETTE	DMH Licensed No	)
LEXINGTON MO	64067-1974	Region 3	Facility Number 17543	3
BRISTOL MANOR OF LINCOLN				
204 SOUTH HIGHWAY 65		<b>Telephone</b> (660) 547-2580	Alzheimer's Unit No	)
LINCOLN MO	65338-2587	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 204 SOUTH HIGHWAY 65		County BENTON	DMH Licensed No	0
	65338-2587	Region 6	Facility Number 18092	2
BRISTOL MANOR OF MACON		T. I. I. (650) 205 2020		
707 RANCHLAND DR	cassa 1004	<b>Telephone</b> (660) 385-3020	Alzheimer's Unit No	
	63552-1994	Level of Care: RCF	Bed Capacity 12	
Mailing Address 707 RANCHLAND DR	cassa 1004	County MACON	DMH Licensed No	
MACON MO	63552-1994	Region 5	Facility Number 17865	)
BRISTOL MANOR OF MARCELINE				
102 EAST HAYDEN		<b>Telephone</b> (660) 376-2210	Alzheimer's Unit No	)
MARCELINE MO	64658-2003	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 102 EAST HAYDEN		County LINN	DMH Licensed No	Э
MARCELINE MO	64658-2003	Region 5	Facility Number 17764	1
DDICTOL MANOD OF MADVALLE				
BRISTOL MANOR OF MARYVILLE		The Land (CCO) 592 4121	All to delta	_
323 EAST SUMMIT DR	(4469-2610	<b>Telephone</b> (660) 582-4131	Alzheimer's Unit No	
	64468-3619	Level of Care: RCF	Bed Capacity 12 DMH Licensed No.	
Mailing Address 323 EAST SUMMIT DR	(4460-2610	County NODAWAY		
MARYVILLE MO	64468-3619	Region 4	Facility Number 19843	,
BRISTOL MANOR OF MONROE CITY				
1017 EAST LAWN ST		<b>Telephone</b> (573) 735-3068	Alzheimer's Unit No	)
MONROE CITY MO	63456-1433	Level of Care: RCF	Bed Capacity 12	2
Mailing Address 1017 EAST LAWN ST		County MONROE	DMH Licensed Ye	s
MONROE CITY MO	63456-1433	Region 5	Facility Number 20045	5

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DDICTOL MANOD OF NEVADA			
BRISTOL MANOR OF NEVADA 401 EAST WALNUT		<b>Telephone</b> (417) 667-5700	Alzheimer's Unit No
NEVADA	MO 64772-2457	Level of Care: RCF	Bed Capacity 12
Mailing Address 401 EAST WALNUT	017,22187	County VERNON	DMH Licensed Yes
NEVADA	MO 64772-2457	Region 1	Facility Number 18471
		8	•
BRISTOL MANOR OF OAK GROVE	E		
300 NORTH AUSTIN		<b>Telephone</b> (816) 625-8691	Alzheimer's Unit No
OAK GROVE	MO 64075-8109	Level of Care: RCF	Bed Capacity 12
Mailing Address 300 N AUSTIN		County JACKSON	<b>DMH Licensed</b> No
OAK GROVE	MO 64075-8109	Region 3	Facility Number 16552
BRISTOL MANOR OF ODESSA			
115 SOUTH 5TH ST		<b>Telephone</b> (816) 633-8692	Alzheimer's Unit No
ODESSA	MO 64076-1330	Level of Care: RCF	Bed Capacity 12
Mailing Address 115 S 5TH ST		County LAFAYETTE	DMH Licensed No
ODESSA	MO 64076-1330	Region 3	Facility Number 16547
BRISTOL MANOR OF PACIFIC			
2049 ROSE LN	150 50050 1455	<b>Telephone</b> (636) 257-8020	Alzheimer's Unit No
PACIFIC 2040 POSE LN	MO 63069-1165	Level of Care: RCF	Bed Capacity 12
Mailing Address 2049 ROSE LN PACIFIC	MO 63069-1165	County FRANKLIN	DMH Licensed No
PACIFIC	MO 03009-1103	Region 6	Facility Number 20237
BRISTOL MANOR OF PALMYRA			
1815 SOUTH MAIN		<b>Telephone</b> (573) 769-2127	Alzheimer's Unit No
PALMYRA	MO 63461-1961	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 1815 SOUTH MAIN		County MARION	<b>DMH Licensed</b> No
PALMYRA	MO 63461-1961	Region 5	Facility Number 20260
BRISTOL MANOR OF PLEASANT I	HILL		
2124 HIGHRIDGE		<b>Telephone</b> (816) 987-2562	Alzheimer's Unit No
PLEASANT HILL	MO 64080-1912	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 2124 HIGHRIDGE		County CASS	DMH Licensed No
PLEASANT HILL	MO 64080-1912	Region 3	Facility Number 16538
BRISTOL MANOR OF PRINCETON	ſ		
200 NORTH FULLERTON		<b>Telephone</b> (660) 748-4354	Alzheimer's Unit No
PRINCETON	MO 64673-1176	Level of Care: RCF	Bed Capacity 12
Mailing Address 200 N FULLERTON		<b>County</b> MERCER	DMH Licensed No
PRINCETON	MO 64673-1176	Region 4	Facility Number 18846
BRISTOL MANOR OF RAYMORE			
604 EAST SUNRISE DR		<b>Telephone</b> (816) 322-6782	Alzheimer's Unit No
RAYMORE	MO 64083-9037	Level of Care: RCF	Bed Capacity 12
Mailing Address 604 EAST SUNRISE	DR	County CASS	DMH Licensed No
RAYMORE	MO 64083-9037	Region 3	Facility Number 19730

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BRISTOL MANOR OF REPUBLIC 634 EAST HIGHWAY 174 REPUBLIC Mailing Address 634 EAST HWY 174	MO 65738-1124	Telephone (417) 732-8998 Level of Care: RCF County GREENE	Alzheimer's Unit No Bed Capacity 12 DMH Licensed No
REPUBLIC	MO 65738-1124	Region 1	Facility Number 20841
BRISTOL MANOR OF SALISBURY			
102 NORTH WILLIE ST		<b>Telephone</b> (660) 388-5728	Alzheimer's Unit No
SALISBURY	MO 65281-1458	Level of Care: RCF	Bed Capacity 12
Mailing Address 102 NORTH WILLIE	ST	County CHARITON	<b>DMH Licensed</b> No
SALISBURY	MO 65281-1458	Region 5	Facility Number 18325
BRISTOL MANOR OF SEDALIA			
1208 EAST 24TH ST		<b>Telephone</b> (660) 827-2028	Alzheimer's Unit No
SEDALIA	MO 65301-8231	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 1208 EAST 24TH ST		County PETTIS	DMH Licensed No
SEDALIA	MO 65301-8231	Region 6	Facility Number 15808
BRISTOL MANOR OF SMITHVILLE	Σ		
1502 SOUTH COMMERCIAL		<b>Telephone</b> (816) 532-4490	Alzheimer's Unit No
SMITHVILLE	MO 64089-8474	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 1502 S COMMERCIA	L	County CLAY	DMH Licensed No
SMITHVILLE	MO 64089-8474	Region 4	Facility Number 17515
BRISTOL MANOR OF STOVER			
607 WEST 4TH ST		<b>Telephone</b> (573) 377-4519	Alzheimer's Unit No
STOVER	MO 65078-0807	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 607 WEST 4TH ST		County MORGAN	<b>DMH Licensed</b> No
STOVER	MO 65078-0807	Region 6	Facility Number 18863
BRISTOL MANOR OF TRENTON			
1701 EAST 28TH ST		<b>Telephone</b> (660) 359-5599	Alzheimer's Unit No
TRENTON	MO 64683-1177	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 1701 EAST 28TH ST		County GRUNDY	DMH Licensed No
TRENTON	MO 64683-1177	Region 4	Facility Number 18597
BRISTOL MANOR OF UNIONVILLE			
715 NORTH 22ND ST, HWY 5 NORTH		<b>Telephone</b> (660) 947-2151	Alzheimer's Unit No
UNIONVILLE	MO 63565-1142	Level of Care: RCF	Bed Capacity 12
Mailing Address 715 NORTH 22ND ST		County PUTNAM	DMH Licensed No
UNIONVILLE	MO 63565-1142	Region 5	Facility Number 19153
BRISTOL MANOR OF WARRENSBU	JRG		
603 CREACH		<b>Telephone</b> (660) 747-8319	Alzheimer's Unit No
WARRENSBURG	MO 64093-1994	Level of Care: RCF	Bed Capacity 12
Mailing Address 603 CREACH	MO (4002 1004	County JOHNSON	DMH Licensed No
WARRENSBURG	MO 64093-1994	Region 3	Facility Number 16599

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BRISTOL MANOR OF WARRENTO	N		
815 WOOLF ROAD		<b>Telephone</b> (636) 456-1437	Alzheimer's Unit No
WARRENTON	MO 63383-6184	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 815 WOOLF RD		County WARREN	<b>DMH Licensed</b> No
WARRENTON	MO 63383-6184	Region 6	Facility Number 19954
BRISTOL MANOR OF WARSAW		T. 1	
1600 ESTATE DR	MO 65355 2061	<b>Telephone</b> (660) 438-7173	Alzheimer's Unit No
WARSAW	MO 65355-3061	Level of Care: RCF	Bed Capacity 12
Mailing Address 1600 ESTATE DR	MO 65355 2061	County BENTON	DMH Licensed No
WARSAW	MO 65355-3061	Region 6	Facility Number 16343
BRISTOL MANOR OF WASHINGTO	ON		
100 WEST 12TH ST		<b>Telephone</b> (636) 390-0050	Alzheimer's Unit No
WASHINGTON	MO 63090-4445	Level of Care: RCF	Bed Capacity 12
Mailing Address 100 WEST 12TH ST	110 000,0 1110	County FRANKLIN	DMH Licensed No
WASHINGTON	MO 63090-4445	Region 6	Facility Number 20138
William (OTO)	1120 00000 1110	Region 0	20130
BRISTOL MANOR OF WEBB CITY			
1803 NORTH MAIN, HIGHWAY D		<b>Telephone</b> (417) 673-4231	Alzheimer's Unit No
WEBB CITY	MO 64870-1193	Level of Care: RCF	Bed Capacity 12
Mailing Address 1803 NORTH MAIN,	HIGHWAY D	County JASPER	DMH Licensed No
WEBB CITY	MO 64870-1193	Region 1	Facility Number 20537
BRISTOL MANOR OF WENTZVILI	Æ		
840 WEST NORTHVIEW		<b>Telephone</b> (636) 639-6777	Alzheimer's Unit No
WENTZVILLE	MO 63385-1036	Level of Care: RCF	Bed Capacity 12
Mailing Address 840 W NORTHVIEW		County SAINT CHARLES	DMH Licensed No
WENTZVILLE	MO 63385-1036	Region 5	Facility Number 20397
BRISTOL MANOR OF WESTON			
178 WALNUT		<b>Telephone</b> (816) 386-5507	Alzheimer's Unit No
WESTON	MO 64098-1328	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 178 WALNUT		County PLATTE	DMH Licensed No
WESTON	MO 64098-1328	Region 4	Facility Number 16741
BRISTOL MANOR OF WILLARD			
511 WATSON		<b>Telephone</b> (417) 742-0090	Alzheimer's Unit No
WILLARD	MO 65781-8314	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 511 WATSON		County GREENE	<b>DMH Licensed</b> No
WILLARD	MO 65781-8314	Region 1	Facility Number 20838
BROOK CHERITH ASSISTED LIVI	NG		
104 EAST ELM ST		<b>Telephone</b> (660) 277-4439	Alzheimer's Unit No
HUNTSVILLE	MO 65259-1111	Level of Care: ALF	Bed Capacity 38
Mailing Address 104 EAST ELM ST		County RANDOLPH	DMH Licensed Yes
HUNTSVILLE	MO 65259-1111	Region 5	Facility Number 10918
		· o- *	

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BROOKDALE CREVE COEUR			
ONE NEW BALLAS PLACE		<b>Telephone</b> (314) 432-5200	Alzheimer's Unit No
CREVE COEUR	MO 63146-8700	Level of Care: ALF**	<b>Bed Capacity</b> 46
Mailing Address ONE NEW BALLAS PI		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
CREVE COEUR	MO 63146-8700	Region 7	Facility Number 26178
BROOKDALE WEST COUNTY			
785 HENRY AVE		<b>Telephone</b> (636) 527-5700	Alzheimer's Unit Yes
	MO 63011-2736	Level of Care: ALF**	<b>Bed Capacity</b> 98
Mailing Address 785 HENRY AVE		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
BALLWIN	MO 63011-2736	Region 7	Facility Number 28149
BROOKDALE WORNALL PLACE 501 WEST 107TH ST		<b>Telephone</b> (816) 941-7777	Alzheimer's Unit No
	MO 64114-5919	Telephone (816) 941-7777 Level of Care: ALF**	Bed Capacity 68
Mailing Address 501 WEST 107TH ST	MO 04114-3919	County JACKSON	DMH Licensed No
•	MO 64114-5919		
RANSAS CII I	WIO 04114-3919	Region 3	Facility Number 29304
BROOKE HAVEN HEALTHCARE			
1410 NORTH KENTUCKY AVE		<b>Telephone</b> (417) 256-7975	Alzheimer's Unit Yes
WEST PLAINS	MO 65775-1822	Level of Care: SNF	Bed Capacity 120
Mailing Address 1410 NORTH KENTU	CKY AVE	County HOWELL	DMH Licensed No
	MO 65775-1822	Region 1 Medicare/Medicaid	Facility Number 06253
			·
BROOKHAVEN NURSING & REHAB			
3405 WEST MT VERNON		<b>Telephone</b> (417) 874-9600	Alzheimer's Unit No
SPRINGFIELD	MO 65802-5241	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 3405 WEST MT VERN	ION	County GREENE	DMH Licensed No
SPRINGFIELD	MO 65802-5241	Region 1 Medicare/Medicaid	Facility Number 09512
BROOKING PARK		Telephone (214) 576 5545	Alghaimania Unit No
307 SOUTH WOODS MILL RD CHESTERFIELD	MO (2017 2419	Telephone (314) 576-5545	Alzheimer's Unit No Bed Capacity 97
Mailing Address 307 SOUTH WOODS M	MO 63017-3418	Level of Care: SNF County SAINT LOUIS COUNTY	
9	MO 63017-3418	•	
CHESTERFIELD	WIO 03017-3418	Region 7 Medicare	Facility Number 14661
BROOKING PARK			
307 SOUTH WOODS MILL RD		<b>Telephone</b> (314) 576-5545	Alzheimer's Unit Yes
CHESTERFIELD	MO 63017-3418	Level of Care: ALF**	<b>Bed Capacity</b> 93
Mailing Address 307 SOUTH WOODS M	MILL RD	County SAINT LOUIS COUNTY	DMH Licensed No
	MO 63017-3418	Region 7	Facility Number 14661
		J	-
BROOKSIDE MANOR RESIDENTIAL	CARE, LLC		
2434 HIGHWAY H		<b>Telephone</b> (573) 756-6434	Alzheimer's Unit No
	MO 63640-7033	Level of Care: RCF*	Bed Capacity 20
Mailing Address 2434 HIGHWAY H		County SAINT FRANCOIS	DMH Licensed Yes
FARMINGTON	MO 63640-7033	Region 2	Facility Number 20034

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DDINGWICK MUDGING & DELIAD			
BRUNSWICK NURSING & REHAB		<b>Telephone</b> (660) 548-3182	Alzheimer's Unit No
721 W HARRISON ST BRUNSWICK	MO 65236-1096	• '	
			Bed Capacity 60
Mailing Address 721 W HARRISON S' BRUNSWICK			DMH Licensed No
BRUNSWICK	MO 65236-1096	Region 5 Medicare/Medicaid	Facility Number 03123
BUFFALO PRAIRIE CENTER FOR	REHAB AND HEALTHCARE		
631 WEST MAIN ST		<b>Telephone</b> (417) 345-5422	Alzheimer's Unit NO
BUFFALO	MO 65622-7496	Level of Care: SNF	Bed Capacity 60
Mailing Address 631 WEST MAIN ST	110 00022 / 150	County DALLAS	DMH Licensed No
BUFFALO	MO 65622-7496	Region 1 Medicare/Medicaid	Facility Number 16700
		C .	
BUNGALOWS AT BRANSON MEAD	oows		
5351 GRETNA ROAD		<b>Telephone</b> (417) 334-3336	Alzheimer's Unit No
BRANSON	MO 65616-7298	Level of Care: RCF	Bed Capacity 104
Mailing Address 5351 GRETNA RD		County TANEY	<b>DMH Licensed</b> No
BRANSON	MO 65616-7298	Region 1	Facility Number 23683
NAME OF COMMENTS	VIII A GE		
BUNGALOWS AT CHESTERFIELD	VILLAGE		
2410 WEST CHESTERFIELD BLVD	MO (5005 0601	<b>Telephone</b> (417) 886-4000	Alzheimer's Unit No
SPRINGFIELD	MO 65807-8631	Level of Care: RCF	Bed Capacity 92
Mailing Address 2410 W CHESTERFII		County GREENE	DMH Licensed No
SPRINGFIELD	MO 65807-8631	Region 1	Facility Number 22584
BUNGALOWS AT NEVADA			
640 EAST HIGHLAND		<b>Telephone</b> (417) 667-3883	Alzheimer's Unit No
NEVADA	MO 64772-1091	Level of Care: RCF	Bed Capacity 37
Mailing Address 640 EAST HIGHLAN	D	County VERNON	DMH Licensed No
NEVADA	MO 64772-1091	Region 1	Facility Number 23732
BUNGALOWS AT SPRINGFIELD E. 3540 EAST CHEROKEE	AST	<b>Telephone</b> (417) 889-2222	Alzheimer's Unit No
SPRINGFIELD	MO 65809-2828	Level of Care: RCF	Bed Capacity 67
			• •
Mailing Address 3540 EAST CHEROK SPRINGFIELD	MO 65809-2828	County GREENE	DMH Licensed No Facility Number 21025
SPRINGFIELD	MO 03809-2828	Region 1	Facility Number 21025
BUNKER RESIDENTIAL HOME			
500 CULLER AVE		<b>Telephone</b> (573) 689-1392	Alzheimer's Unit No
BUNKER	MO 63629-	Level of Care: RCF	Bed Capacity 12
Mailing Address PO BOX 276		County REYNOLDS	DMH Licensed Yes
BUNKER	MO 63629-0276	Region 2	Facility Number 16882
BUTLER CENTER FOR REHABILIT	TATION AND HEALTHCARE		
416 SOUTH HIGH ST	1.0	<b>Telephone</b> (660) 679-6158	Alzheimer's Unit No
BUTLER	MO 64730-1827	Level of Care: SNF	Bed Capacity 98
Mailing Address 416 S HIGH ST	MO (4730 1007	County BATES	DMH Licensed No
BUTLER	MO 64730-1827	Region 3 Medicare/Medicaid	Facility Number 08627

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BUTTERFIELD RESIDENTIAL CA	ARE CENTER			
1120 NORTH BUTTERFIELD RD		<b>Telephone</b> (417) 326-5200	Alzheimer's Unit	No
BOLIVAR	MO 65613-1000	Level of Care: RCF	<b>Bed Capacity</b>	24
Mailing Address 1120 N BUTTERF	IELD RD	County POLK	DMH Licensed	No
BOLIVAR	MO 65613-1000	Region 1	<b>Facility Number</b>	14436
BUTTERFIELD RESIDENTIAL CA	ARE CENTER			
1120 NORTH BUTTERFIELD RD		<b>Telephone</b> (417) 326-5200	Alzheimer's Unit	No
BOLIVAR	MO 65613-1000	Level of Care: RCF*	Bed Capacity	66
Mailing Address 1120 N BUTTERF		County POLK	DMH Licensed	No
BOLIVAR	MO 65613-1000	Region 1	Facility Number	14436
BOLIVIA	110 03013 1000	Region 1	Facility Number	14430
BUTTERFLY HAVEN		Tolonhono (016) 041 2026	Alahaima-t- IIt4	NT_
11500 CAMPBELL ST	MO (4121 2020	<b>Telephone</b> (816) 941-2836	Alzheimer's Unit	No
KANSAS CITY	MO 64131-3829	Level of Care: RCF	Bed Capacity	12
Mailing Address PO BOX 481578	MO (4140 1570	County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64148-1578	Region 3	Facility Number	18207
CALIFORNIA CARE CENTER				
1106 SOUTH OAK, ROUTE 3	150 (5040 4460	<b>Telephone</b> (573) 796-3127	Alzheimer's Unit	No
CALIFORNIA	MO 65018-1462	Level of Care: SNF	Bed Capacity	60
Mailing Address 1106 SOUTH OAK		County MONITEAU	DMH Licensed	No
CALIFORNIA	MO 65018-1462	Region 6 Medicare/Medicaid	Facility Number	10437
CAMDENTON WINDSOR ESTATI	ES			
2042 N BUSINESS ROUTE 5		<b>Telephone</b> (573) 346-5654	Alzheimer's Unit	No
2042 N BUSINESS ROUTE 5 CAMDENTON	MO 65020-2611	Level of Care: SNF	<b>Bed Capacity</b>	82
2042 N BUSINESS ROUTE 5 CAMDENTON <b>Mailing Address</b> 2042 N BUSINESS	MO 65020-2611 ROUTE 5	Level of Care: SNF County CAMDEN	Bed Capacity DMH Licensed	82 No
2042 N BUSINESS ROUTE 5 CAMDENTON	MO 65020-2611	Level of Care: SNF	<b>Bed Capacity</b>	82
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON	MO 65020-2611 ROUTE 5 MO 65020-2611	Level of Care: SNF County CAMDEN	Bed Capacity DMH Licensed	82 No
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA	MO 65020-2611 ROUTE 5 MO 65020-2611	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	82 No 08688
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA 705 GRAND CANYON DRIVE	MO 65020-2611  ROUTE 5  MO 65020-2611  BILITATION CENTER	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (573) 756-8911	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	82 No 08688 NO
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA 705 GRAND CANYON DRIVE FARMINGTON	MO 65020-2611  ROUTE 5  MO 65020-2611  BILITATION CENTER  MO 63640-2161	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (573) 756-8911 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	82 No 08688 NO 97
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA 705 GRAND CANYON DRIVE FARMINGTON Mailing Address 705 GRAND CANY	MO 65020-2611  ROUTE 5  MO 65020-2611  BILITATION CENTER  MO 63640-2161  YON DRIVE	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (573) 756-8911 Level of Care: SNF County SAINT FRANCOIS	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	82 No 08688 NO 97 No
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA 705 GRAND CANYON DRIVE FARMINGTON	MO 65020-2611  ROUTE 5  MO 65020-2611  BILITATION CENTER  MO 63640-2161	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (573) 756-8911 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	82 No 08688 NO 97
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA 705 GRAND CANYON DRIVE FARMINGTON Mailing Address 705 GRAND CANY FARMINGTON	MO 65020-2611  ROUTE 5  MO 65020-2611  BILITATION CENTER  MO 63640-2161  YON DRIVE  MO 63640-2161	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (573) 756-8911 Level of Care: SNF County SAINT FRANCOIS	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	82 No 08688 NO 97 No
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA 705 GRAND CANYON DRIVE FARMINGTON Mailing Address 705 GRAND CANY FARMINGTON  CANDLELIGHT LODGE RETIRE	MO 65020-2611  ROUTE 5  MO 65020-2611  BILITATION CENTER  MO 63640-2161  YON DRIVE  MO 63640-2161	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (573) 756-8911 Level of Care: SNF County SAINT FRANCOIS Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	82 No 08688 NO 97 No 00978
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA 705 GRAND CANYON DRIVE FARMINGTON Mailing Address 705 GRAND CANY FARMINGTON  CANDLELIGHT LODGE RETIRE 1406 BUSINESS LOOP 70 WEST	MO 65020-2611  ROUTE 5  MO 65020-2611  BILITATION CENTER  MO 63640-2161  CON DRIVE  MO 63640-2161  MENT CENTER	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (573) 756-8911 Level of Care: SNF County SAINT FRANCOIS Region 2 Medicare/Medicaid  Telephone (573) 449-5287	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	82 No 08688 NO 97 No 00978
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA 705 GRAND CANYON DRIVE FARMINGTON Mailing Address 705 GRAND CANY FARMINGTON  CANDLELIGHT LODGE RETIRE 1406 BUSINESS LOOP 70 WEST COLUMBIA	MO 65020-2611  ROUTE 5  MO 65020-2611  BILITATION CENTER  MO 63640-2161  CON DRIVE  MO 63640-2161  MENT CENTER  MO 65202-1324	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (573) 756-8911 Level of Care: SNF County SAINT FRANCOIS Region 2 Medicare/Medicaid  Telephone (573) 449-5287 Level of Care: ALF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	82 No 08688 NO 97 No 00978
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA 705 GRAND CANYON DRIVE FARMINGTON Mailing Address 705 GRAND CANY FARMINGTON  CANDLELIGHT LODGE RETIRE 1406 BUSINESS LOOP 70 WEST COLUMBIA Mailing Address 1406 BUSINESS LO	MO 65020-2611  ROUTE 5	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (573) 756-8911 Level of Care: SNF County SAINT FRANCOIS Region 2 Medicare/Medicaid  Telephone (573) 449-5287 Level of Care: ALF County BOONE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	82 No 08688 NO 97 No 00978
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA 705 GRAND CANYON DRIVE FARMINGTON Mailing Address 705 GRAND CANY FARMINGTON  CANDLELIGHT LODGE RETIRE 1406 BUSINESS LOOP 70 WEST COLUMBIA	MO 65020-2611  ROUTE 5  MO 65020-2611  BILITATION CENTER  MO 63640-2161  CON DRIVE  MO 63640-2161  MENT CENTER  MO 65202-1324	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (573) 756-8911 Level of Care: SNF County SAINT FRANCOIS Region 2 Medicare/Medicaid  Telephone (573) 449-5287 Level of Care: ALF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	82 No 08688 NO 97 No 00978
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA 705 GRAND CANYON DRIVE FARMINGTON Mailing Address 705 GRAND CANY FARMINGTON  CANDLELIGHT LODGE RETIRE 1406 BUSINESS LOOP 70 WEST COLUMBIA Mailing Address 1406 BUSINESS LOCOLUMBIA	MO 65020-2611  ROUTE 5	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (573) 756-8911 Level of Care: SNF County SAINT FRANCOIS Region 2 Medicare/Medicaid  Telephone (573) 449-5287 Level of Care: ALF County BOONE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	82 No 08688 NO 97 No 00978
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA 705 GRAND CANYON DRIVE FARMINGTON Mailing Address 705 GRAND CANY FARMINGTON  CANDLELIGHT LODGE RETIRE 1406 BUSINESS LOOP 70 WEST COLUMBIA Mailing Address 1406 BUSINESS LOCOLUMBIA CANDLELIGHT LODGE RETIRE	MO 65020-2611  ROUTE 5	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (573) 756-8911 Level of Care: SNF County SAINT FRANCOIS Region 2 Medicare/Medicaid  Telephone (573) 449-5287 Level of Care: ALF County BOONE Region 6	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	82 No 08688 NO 97 No 00978 Yes 37 No 01013
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA 705 GRAND CANYON DRIVE FARMINGTON Mailing Address 705 GRAND CANY FARMINGTON  CANDLELIGHT LODGE RETIRE 1406 BUSINESS LOOP 70 WEST COLUMBIA Mailing Address 1406 BUSINESS LO COLUMBIA  CANDLELIGHT LODGE RETIRE 1406 BUSINESS LOOP 70 WEST	MO 65020-2611  ROUTE 5	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (573) 756-8911 Level of Care: SNF County SAINT FRANCOIS Region 2 Medicare/Medicaid  Telephone (573) 449-5287 Level of Care: ALF County BOONE Region 6	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	82 No 08688 NO 97 No 00978 Yes 37 No 01013
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA 705 GRAND CANYON DRIVE FARMINGTON Mailing Address 705 GRAND CANY FARMINGTON  CANDLELIGHT LODGE RETIRE 1406 BUSINESS LOOP 70 WEST COLUMBIA Mailing Address 1406 BUSINESS LO COLUMBIA  CANDLELIGHT LODGE RETIRE 1406 BUSINESS LOOP 70 WEST COLUMBIA	MO 65020-2611  ROUTE 5	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (573) 756-8911 Level of Care: SNF County SAINT FRANCOIS Region 2 Medicare/Medicaid  Telephone (573) 449-5287 Level of Care: ALF County BOONE Region 6  Telephone (573) 449-5287 Level of Care: ALF County ALF County BOONE Region 6	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	82 No 08688 NO 97 No 00978 Yes 37 No 01013
2042 N BUSINESS ROUTE 5 CAMDENTON Mailing Address 2042 N BUSINESS CAMDENTON  CAMELOT NURSING AND REHA 705 GRAND CANYON DRIVE FARMINGTON Mailing Address 705 GRAND CANY FARMINGTON  CANDLELIGHT LODGE RETIRE 1406 BUSINESS LOOP 70 WEST COLUMBIA Mailing Address 1406 BUSINESS LO COLUMBIA  CANDLELIGHT LODGE RETIRE 1406 BUSINESS LOOP 70 WEST	MO 65020-2611  ROUTE 5	Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (573) 756-8911 Level of Care: SNF County SAINT FRANCOIS Region 2 Medicare/Medicaid  Telephone (573) 449-5287 Level of Care: ALF County BOONE Region 6	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	82 No 08688 NO 97 No 00978 Yes 37 No 01013

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CAPE ALBEON			
3300 LAKE BEND DR	Telephone	(636) 861-3200 Alzhei	imer's Unit Yes
VALLEY PARK MO 630	_	` '	apacity 100
Mailing Address 3300 LAKE BEND DR			Licensed No
VALLEY PARK MO 630	·		ty Number 22838
VALLET TAKE	Kegion /	1 delli	22030
CAPETOWN ASSISTED LIVING			
2857 CAPE LACROIX RD	Telephone	(573) 334-4855 <b>Alzhei</b>	imer's Unit Yes
CAPE GIRARDEAU MO 637	01-8588 Level of Care:	ALF** Bed C	apacity 48
Mailing Address 2857 CAPE LACROIX RD	County CA	APE GIRARDEAU <b>DMH</b>	Licensed No
CAPE GIRARDEAU MO 637	01-8588 <b>Region</b> 2	Facili	ty Number 23989
CADECIWEDS INN			
CAREGIVERS INN 1297 FEISE RD	Telephone	(636) 240-7979 <b>Alzhei</b>	imer's Unit Yes
DARDENNE PRAIRIE MO 633	•	` '	apacity 30
Mailing Address 1297 FEISE RD			Licensed No
DARDENNE PRAIRIE MO 633	•		ty Number 15342
SINDEN DING ME	Kegion 5	T ucini	13342
CARL JUNCTION RESIDENTIAL CARE			
201 FIR RD	Telephone	(417) 782-5659 <b>Alzhei</b>	imer's Unit No
CARL JUNCTION MO 648	34-9222 Level of Care:	RCF* Bed C	apacity 37
Mailing Address 201 FIR RD	<b>County</b> JA	SPER <b>DMH</b>	Licensed No
CARL JUNCTION MO 648	34-9222 <b>Region</b> 1	Facilit	ty Number 20550
CARNEGIE VILLAGE REHABILITATION & 1	HEALTH CARE CENTER		
CARNEGIE VILLAGE REHABILITATION & 1 105 BERNARD DRIVE	HEALTH CARE CENTER  Telephone	(816) 348-8815 <b>Alzhe</b> i	imer's Unit No
	Telephone		imer's Unit No apacity 78
105 BERNARD DRIVE BELTON MO 640	Telephone 12-6181 Level of Care:	SNF Bed C	
105 BERNARD DRIVE	Telephone 12-6181 Level of Care: County CA	SNF Bed C ASS DMH	apacity 78
105 BERNARD DRIVE BELTON MO 640 Mailing Address 105 BERNARD DRIVE BELTON MO 640	Telephone 12-6181 Level of Care: County CA Region 3	SNF Bed C ASS DMH	apacity 78 Licensed No
105 BERNARD DRIVE BELTON MO 640 Mailing Address 105 BERNARD DRIVE BELTON MO 640  CARNEGIE VILLAGE SENIOR LIVING COM	Telephone 12-6181 Level of Care: County CA 12-6181 Region 3	SNF Bed C ASS DMH Medicare/Medicaid Facilit	apacity 78 Licensed No ty Number 30531
105 BERNARD DRIVE BELTON MO 640 Mailing Address 105 BERNARD DRIVE BELTON MO 640  CARNEGIE VILLAGE SENIOR LIVING COM- 103 BERNARD DR	Telephone 12-6181 Level of Care: County CA 12-6181 Region 3  MUNITY Telephone	SNF Bed C ASS DMH Medicare/Medicaid Facilit (816) 322-8444 Alzhei	apacity 78 Licensed No ty Number 30531 imer's Unit No
105 BERNARD DRIVE BELTON MO 640 Mailing Address 105 BERNARD DRIVE BELTON MO 640  CARNEGIE VILLAGE SENIOR LIVING COM 103 BERNARD DR BELTON MO 640	Telephone 12-6181 Level of Care: County CA 12-6181 Region 3  MUNITY Telephone 12-6182 Level of Care:	SNF Bed C ASS DMH Medicare/Medicaid Facilit  (816) 322-8444 Alzhei ALF** Bed C	apacity 78 Licensed No ty Number 30531  imer's Unit No apacity 85
105 BERNARD DRIVE BELTON MO 640 Mailing Address 105 BERNARD DRIVE BELTON MO 640  CARNEGIE VILLAGE SENIOR LIVING COM 103 BERNARD DR BELTON MO 640 Mailing Address 103 BERNARD DR	Telephone Level of Care: County CA Region 3  MUNITY Telephone Level of Care: County CA C	SNF Bed C ASS DMH Medicare/Medicaid Facilit  (816) 322-8444 Alzhei ALF** Bed C ASS DMH	apacity 78 Licensed No ty Number 30531  imer's Unit No apacity 85 Licensed No
105 BERNARD DRIVE BELTON MO 640 Mailing Address 105 BERNARD DRIVE BELTON MO 640  CARNEGIE VILLAGE SENIOR LIVING COM 103 BERNARD DR BELTON MO 640	Telephone Level of Care: County CA Region 3  MUNITY Telephone Level of Care: County CA C	SNF Bed C ASS DMH Medicare/Medicaid Facilit  (816) 322-8444 Alzhei ALF** Bed C ASS DMH	apacity 78 Licensed No ty Number 30531  imer's Unit No apacity 85
105 BERNARD DRIVE BELTON MO 640 Mailing Address 105 BERNARD DRIVE BELTON MO 640  CARNEGIE VILLAGE SENIOR LIVING COM 103 BERNARD DR BELTON MO 640 Mailing Address 103 BERNARD DR	Telephone Level of Care: County CA Region 3  MUNITY Telephone Level of Care: County CA C	SNF Bed C ASS DMH Medicare/Medicaid Facilit  (816) 322-8444 Alzhei ALF** Bed C ASS DMH	apacity 78 Licensed No ty Number 30531  imer's Unit No apacity 85 Licensed No
BELTON MO 640  Mailing Address 105 BERNARD DRIVE BELTON MO 640  CARNEGIE VILLAGE SENIOR LIVING COM 103 BERNARD DR  BELTON MO 640  Mailing Address 103 BERNARD DR  BELTON MO 640	Telephone Level of Care: County CA Region 3  MUNITY Telephone Level of Care: County CA C	SNF Bed C ASS DMH Medicare/Medicaid Facilit  (816) 322-8444 Alzhei ALF** Bed C ASS DMH Facilit  (314) 353-9552 Alzhei	apacity 78 Licensed No ty Number 30531  imer's Unit No apacity 85 Licensed No ty Number 25482  imer's Unit No
BELTON MO 640  Mailing Address 105 BERNARD DRIVE BELTON MO 640  CARNEGIE VILLAGE SENIOR LIVING COMMAILING BERNARD DR BELTON MO 640  Mailing Address 103 BERNARD DR BELTON MO 640  CARONDELET RETIREMENT MANOR	Telephone   Level of Care:   County   CA	SNF Bed C ASS DMH Medicare/Medicaid Facilit  (816) 322-8444 Alzhei ALF** Bed C ASS DMH Facilit  (314) 353-9552 Alzhei	apacity 78 Licensed No ty Number 30531  imer's Unit No apacity 85 Licensed No ty Number 25482
BELTON MO 640  Mailing Address 105 BERNARD DRIVE BELTON MO 640  CARNEGIE VILLAGE SENIOR LIVING COM 103 BERNARD DR BELTON MO 640  Mailing Address 103 BERNARD DR BELTON MO 640  CARONDELET RETIREMENT MANOR 6811 MICHIGAN	Telephone Level of Care: County CA Region 3  MUNITY Telephone Level of Care: County CA Region 3  Telephone Level of Care: County CA Region 3	SNF Bed C ASS DMH Medicare/Medicaid Facilit  (816) 322-8444 Alzhei ALF** Bed C ASS DMH Facilit  (314) 353-9552 Alzhei RCF* Bed C	apacity 78 Licensed No ty Number 30531  imer's Unit No apacity 85 Licensed No ty Number 25482  imer's Unit No
BELTON MO 640  Mailing Address 105 BERNARD DRIVE BELTON MO 640  CARNEGIE VILLAGE SENIOR LIVING COM 103 BERNARD DR BELTON MO 640  Mailing Address 103 BERNARD DR BELTON MO 640  CARONDELET RETIREMENT MANOR 6811 MICHIGAN SAINT LOUIS MO 631	Telephone Level of Care: County CA Region 3  MUNITY Telephone Level of Care: County CA Region 3  Telephone Level of Care: County CA Region 3	SNF Bed C ASS DMH Medicare/Medicaid Facilit  (816) 322-8444 Alzhei ALF** Bed C ASS DMH Facilit  (314) 353-9552 Alzhei RCF* Bed C ANT LOUIS CITY DMH	apacity 78 Licensed No ty Number 30531  imer's Unit No apacity 85 Licensed No ty Number 25482  imer's Unit No apacity 33
BELTON MO 640  Mailing Address 105 BERNARD DRIVE BELTON MO 640  CARNEGIE VILLAGE SENIOR LIVING COM 103 BERNARD DR BELTON MO 640  Mailing Address 103 BERNARD DR BELTON MO 640  CARONDELET RETIREMENT MANOR 6811 MICHIGAN SAINT LOUIS MO 631  Mailing Address PO BOX 37073	Telephone Level of Care: County CA Region 3  MUNITY Telephone Level of Care: County CA Region 3  Telephone Level of Care: County CA Region 3  Telephone Level of Care: County CA Region 7	SNF Bed C ASS DMH Medicare/Medicaid Facilit  (816) 322-8444 Alzhei ALF** Bed C ASS DMH Facilit  (314) 353-9552 Alzhei RCF* Bed C ANT LOUIS CITY DMH	apacity 78 Licensed No ty Number 30531  imer's Unit No apacity 85 Licensed No ty Number 25482  imer's Unit No apacity 33 Licensed Yes
BELTON MO 640  Mailing Address 105 BERNARD DRIVE BELTON MO 640  CARNEGIE VILLAGE SENIOR LIVING COM 103 BERNARD DR BELTON MO 640  Mailing Address 103 BERNARD DR BELTON MO 640  CARONDELET RETIREMENT MANOR 6811 MICHIGAN SAINT LOUIS MO 631  Mailing Address PO BOX 37073 SAINT LOUIS MO 631	Telephone Level of Care: County CA Region 3  MUNITY Telephone Level of Care: County CA Region 3  Telephone Level of Care: County CA Region 3  Telephone Level of Care: County CA Region 7	SNF Bed C ASS DMH Medicare/Medicaid Facilit  (816) 322-8444 Alzhei ALF** Bed C ASS DMH Facilit  (314) 353-9552 Alzhei RCF* Bed C AINT LOUIS CITY DMH Facilit	apacity 78 Licensed No ty Number 30531  imer's Unit No apacity 85 Licensed No ty Number 25482  imer's Unit No apacity 33 Licensed Yes
BELTON MO 640  Mailing Address 105 BERNARD DRIVE BELTON MO 640  CARNEGIE VILLAGE SENIOR LIVING COM 103 BERNARD DR BELTON MO 640  Mailing Address 103 BERNARD DR BELTON MO 640  CARONDELET RETIREMENT MANOR 6811 MICHIGAN SAINT LOUIS MO 631  Mailing Address PO BOX 37073 SAINT LOUIS MO 631  CARRIAGE RESIDENTIAL CARE CENTER L	Telephone Level of Care: County CA Region 3  MUNITY Telephone Level of Care: County CA Region 3  Telephone Level of Care: County CA Region 3  Telephone Level of Care: County CA Region 7	SNF Bed C ASS DMH Medicare/Medicaid Facilit  (816) 322-8444 Alzhei ALF** Bed C ASS DMH Facilit  (314) 353-9552 Alzhei RCF* Bed C AINT LOUIS CITY DMH Facilit  (573) 756-8140 Alzhei	apacity 78 Licensed No ty Number 30531  imer's Unit No apacity 85 Licensed No ty Number 25482  imer's Unit No apacity 33 Licensed Yes ty Number 01058
BELTON MO 640  Mailing Address 105 BERNARD DRIVE BELTON MO 640  CARNEGIE VILLAGE SENIOR LIVING COM 103 BERNARD DR BELTON MO 640  Mailing Address 103 BERNARD DR BELTON MO 640  CARONDELET RETIREMENT MANOR 6811 MICHIGAN SAINT LOUIS MO 631  Mailing Address PO BOX 37073 SAINT LOUIS MO 631  CARRIAGE RESIDENTIAL CARE CENTER L 508 NORTH WASHINGTON ST	Telephone Level of Care: County CA Region 3  MUNITY Telephone Level of Care: County CA Region 3  Telephone Level of Care: County CA Region 3  Telephone Level of Care: County CA Region 7	SNF Bed C ASS DMH Medicare/Medicaid Facilit  (816) 322-8444 Alzhei ALF** Bed C ASS DMH Facilit  (314) 353-9552 Alzhei RCF* Bed C AINT LOUIS CITY DMH Facilit  (573) 756-8140 Alzhei RCF* Bed C	apacity 78 Licensed No ty Number 30531  imer's Unit No apacity 85 Licensed No ty Number 25482  imer's Unit No apacity 33 Licensed Yes ty Number 01058
BELTON MO 640  Mailing Address 105 BERNARD DRIVE BELTON MO 640  CARNEGIE VILLAGE SENIOR LIVING COMMAILING ADDRESS 103 BERNARD DR BELTON MO 640  Mailing Address 103 BERNARD DR BELTON MO 640  CARONDELET RETIREMENT MANOR 6811 MICHIGAN SAINT LOUIS MO 631  Mailing Address PO BOX 37073 SAINT LOUIS MO 631  CARRIAGE RESIDENTIAL CARE CENTER LE 508 NORTH WASHINGTON ST FARMINGTON MO 636	Telephone Level of Care: County CA Region 3  MUNITY Telephone Level of Care: County CA Region 3  Telephone Level of Care: County CA Region 3  Telephone Level of Care: County SA  Al-1573 Region 7	SNF Bed C ASS DMH Medicare/Medicaid Facilit  (816) 322-8444 Alzhei ALF** Bed C ASS DMH Facilit  (314) 353-9552 Alzhei RCF* Bed C AINT LOUIS CITY DMH Facilit  (573) 756-8140 Alzhei RCF* Bed C AINT FRANCOIS DMH	apacity 78 Licensed No ty Number 30531  timer's Unit No apacity 85 Licensed No ty Number 25482  timer's Unit No apacity 33 Licensed Yes ty Number 01058

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CARRIAGE SQUARE REHAB AND	HEALTHCARE CENTER			
4009 GENE FIELD RD		<b>Telephone</b> (816) 364-1526	Alzheimer's Unit	No
SAINT JOSEPH	MO 64506-1864	Level of Care: RCF*	<b>Bed Capacity</b>	32
Mailing Address 4009 GENE FIELD R	RD.	County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64506-1864	Region 4	<b>Facility Number</b>	01061
CADDIACE SOLIADE DEHAD AND	HEAT THEADE CENTED			
CARRIAGE SQUARE REHAB AND 4009 GENE FIELD RD	HEALTHCARE CENTER	Talanhana (816) 264 1526	Alahaimanta Iluit	No
SAINT JOSEPH	MO 64506-1864	Telephone (816) 364-1526 Level of Care: SNF	Alzheimer's Unit Bed Capacity	130
Mailing Address 4009 GENE FIELD R			DMH Licensed	No
SAINT JOSEPH	MO 64506-1864		Facility Number	
SAINT JOSEFFI	WIO 04300-1804	Region 4 Medicare/Medicaid	Facility Number	01061
CARRIE DUMAS LONG TERM CA	RE FACILITY			
2836 BENTON BLVD		<b>Telephone</b> (816) 924-5017	Alzheimer's Unit	No
KANSAS CITY	MO 64128-1140	Level of Care: ALF	Bed Capacity	34
Mailing Address 2836 BENTON BLV		County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64128-1140	Region 3	Facility Number	18550
CARRIE ELLIGSON GIETNER HO	ME			
5000 SOUTH BROADWAY		<b>Telephone</b> (314) 752-0000	Alzheimer's Unit	No
SAINT LOUIS	MO 63111-2015	Level of Care: SNF	Bed Capacity	130
Mailing Address 5000 S BROADWAY	7	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63111-2015	Region 7 Medicare/Medicaid	Facility Number	02877
CARROLL HOUSE				
307 GRAND		<b>Telephone</b> (660) 542-1599	Alzheimer's Unit	No
CARROLLTON	MO 64633-2265	Level of Care: SNF	Bed Capacity	63
Mailing Address 307 GRAND		County CARROLL	DMH Licensed	No
CARROLLTON	MO 64633-2265	Region 4 Medicare/Medicaid	Facility Number	22027
CARTHAGE HEALTH AND REHAI	RILITATION CENTER			
1901 BUENA VISTA AVE	SILITITION CLIVILA	<b>Telephone</b> (417) 358-1397	Alzheimer's Unit	Yes
CARTHAGE	MO 64836-3178	Level of Care: SNF	Bed Capacity	120
Mailing Address 1901 BUENA VISTA		County JASPER	DMH Licensed	No
CARTHAGE	MO 64836-3178	Region 1 Medicare/Medicaid	Facility Number	12472
		Treateur of Treateur		
CASARI ANGA CARE CENTER				
CASABLANCA CARE CENTER		m 1 1 (417) 777 7047		N
524 SOUTH ALBANY	MO (5(12.011)	<b>Telephone</b> (417) 777-7247	Alzheimer's Unit	No
BOLIVAR	MO 65613-2116	Level of Care: RCF*	Bed Capacity	11
Mailing Address PO BOX 970	MO (55(12,0070	County POLK	DMH Licensed	Yes
BOLIVAR	MO 65613-0970	Region 1	Facility Number	21150
	R REHAR AND HEALTHCARE			
CASSVILLE HEALTH CENTER FO	K KEIIID III VO HEILE HICIKE	m		
1300 COUNTY FARM RD		<b>Telephone</b> (417) 847-3386	Alzheimer's Unit	No
1300 COUNTY FARM RD CASSVILLE	MO 65625-1726	Level of Care: SNF	<b>Bed Capacity</b>	60
1300 COUNTY FARM RD	MO 65625-1726	- · · · · · · · · · · · · · · · · · · ·		

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CASTLEWOOD SENIOR LIVING THE			
1538 N OLD CASTLE ROAD	<b>Telephone</b> (417) 724-8188	Alzheimer's Unit	Yes
NIXA MO 65714-9902	Level of Care: ALF**	Bed Capacity	66
Mailing Address 1538 N OLD CASTLE ROAD	County CHRISTIAN	DMH Licensed	No
NIXA MO 65714-9902	Region 1	Facility Number	30722
CEDAR KNOLL			
13635 STATE ROUTE V	<b>Telephone</b> (573) 265-3658	Alzheimer's Unit	No
SAINT JAMES MO 65559-8331	Level of Care: ALF	<b>Bed Capacity</b>	32
Mailing Address 13635 STATE ROUTE V	County PHELPS	DMH Licensed	Yes
SAINT JAMES MO 65559-8331	Region 6	Facility Number	01142
CEDAR POINTE	TO 1 1 (572) 264 7766	A11.	V
1800 WHITE COLUMNS DR	<b>Telephone</b> (573) 364-7766	Alzheimer's Unit	Yes
ROLLA MO 65401-2044	Level of Care: SNF	Bed Capacity	102
Mailing Address 1800 WHITE COLUMNS DR	County PHELPS	DMH Licensed	No
ROLLA MO 65401-2044	Region 6 Medicare/Medicaid	Facility Number	06801
CEDAR RIDGE CARE CENTER, LLC			
71 SYCAMORE	<b>Telephone</b> (417) 847-5546	Alzheimer's Unit	No
CASSVILLE MO 65625-1755	• '		30
		Bed Capacity	
Mailing Address PO BOX 633	County BARRY	DMH Licensed	Yes
CASSVILLE MO 65625-0633	Region 1	Facility Number	15295
CEDAR VALLEY BOARDING HOME			
286 HIGHWAY VV	<b>Telephone</b> (573) 686-4877	Alzheimer's Unit	No
	Telephone (573) 686-4877 Level of Care: RCF		
BROSELEY MO 63932-9174	Level of Care: RCF	Bed Capacity	10
	•		
BROSELEY MO 63932-9174  Mailing Address 286 HIGHWAY VV	Level of Care: RCF County BUTLER	Bed Capacity DMH Licensed	10 Yes
BROSELEY MO 63932-9174  Mailing Address 286 HIGHWAY VV	Level of Care: RCF County BUTLER Region 2	Bed Capacity DMH Licensed	10 Yes
BROSELEY MO 63932-9174  Mailing Address 286 HIGHWAY VV  BROSELEY MO 63932-9174	Level of Care: RCF County BUTLER Region 2	Bed Capacity DMH Licensed Facility Number	10 Yes
BROSELEY MO 63932-9174  Mailing Address 286 HIGHWAY VV  BROSELEY MO 63932-9174  CEDARCREST MANOR	Level of Care: RCF County BUTLER Region 2 TEMPORARY CLO	Bed Capacity DMH Licensed Facility Number  OSURE - STAFFING	10 Yes 08923
BROSELEY Mailing Address 286 HIGHWAY VV BROSELEY MO 63932-9174  CEDARCREST MANOR 324 WEST 5TH ST	Level of Care: RCF County BUTLER Region 2  TEMPORARY CLO Telephone (636) 239-7848	Bed Capacity DMH Licensed Facility Number  OSURE - STAFFING Alzheimer's Unit	10 Yes 08923 Yes
BROSELEY Mailing Address 286 HIGHWAY VV BROSELEY MO 63932-9174  CEDARCREST MANOR 324 WEST 5TH ST WASHINGTON MO 63090-2306	Level of Care: RCF County BUTLER Region 2  TEMPORARY CLC Telephone (636) 239-7848 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  OSURE - STAFFING Alzheimer's Unit Bed Capacity	10 Yes 08923 Yes 177
BROSELEY Mailing Address 286 HIGHWAY VV BROSELEY MO 63932-9174  CEDARCREST MANOR 324 WEST 5TH ST WASHINGTON Mailing Address 324 WEST 5TH ST WASHINGTON MO 63090-2306  MO 63090-2306	Level of Care: RCF County BUTLER Region 2  TEMPORARY CLC Telephone (636) 239-7848 Level of Care: SNF County FRANKLIN	Bed Capacity DMH Licensed Facility Number  DSURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed	10 Yes 08923 Yes 177 No
BROSELEY Mailing Address 286 HIGHWAY VV BROSELEY MO 63932-9174  CEDARCREST MANOR 324 WEST 5TH ST WASHINGTON Mailing Address 324 WEST 5TH ST WASHINGTON MO 63090-2306  CEDARGATE HEALTHCARE	Level of Care: RCF County BUTLER Region 2  TEMPORARY CLO Telephone (636) 239-7848 Level of Care: SNF County FRANKLIN Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  DSURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	10 Yes 08923 Yes 177 No 01160
BROSELEY Mailing Address 286 HIGHWAY VV BROSELEY MO 63932-9174  CEDARCREST MANOR 324 WEST 5TH ST WASHINGTON Mailing Address 324 WEST 5TH ST WASHINGTON MO 63090-2306  CEDARGATE HEALTHCARE 2350 KANELL BLVD	Level of Care: RCF County BUTLER Region 2  TEMPORARY CLO Telephone (636) 239-7848 Level of Care: SNF County FRANKLIN Region 6 Medicare/Medicaid  Telephone (573) 785-0188	Bed Capacity DMH Licensed Facility Number  DSURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	10 Yes 08923 Yes 177 No 01160
BROSELEY Mailing Address 286 HIGHWAY VV BROSELEY MO 63932-9174  CEDARCREST MANOR 324 WEST 5TH ST WASHINGTON Mailing Address 324 WEST 5TH ST WASHINGTON MO 63090-2306  CEDARGATE HEALTHCARE	Level of Care: RCF County BUTLER Region 2  TEMPORARY CLO Telephone (636) 239-7848 Level of Care: SNF County FRANKLIN Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  DSURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	10 Yes 08923 Yes 177 No 01160
BROSELEY Mailing Address 286 HIGHWAY VV BROSELEY MO 63932-9174  CEDARCREST MANOR 324 WEST 5TH ST WASHINGTON Mailing Address 324 WEST 5TH ST WASHINGTON MO 63090-2306  CEDARGATE HEALTHCARE 2350 KANELL BLVD	Level of Care: RCF County BUTLER Region 2  TEMPORARY CLO Telephone (636) 239-7848 Level of Care: SNF County FRANKLIN Region 6 Medicare/Medicaid  Telephone (573) 785-0188	Bed Capacity DMH Licensed Facility Number  DSURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	10 Yes 08923 Yes 177 No 01160
BROSELEY Mailing Address 286 HIGHWAY VV BROSELEY MO 63932-9174  CEDARCREST MANOR 324 WEST 5TH ST WASHINGTON Mailing Address 324 WEST 5TH ST WASHINGTON MO 63090-2306  CEDARGATE HEALTHCARE 2350 KANELL BLVD POPLAR BLUFF MO 63901-4036	Level of Care: RCF County BUTLER Region 2  TEMPORARY CLC Telephone (636) 239-7848 Level of Care: SNF County FRANKLIN Region 6 Medicare/Medicaid  Telephone (573) 785-0188 Level of Care: ALF	Bed Capacity DMH Licensed Facility Number  DSURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	10 Yes 08923 Yes 177 No 01160
BROSELEY Mailing Address 286 HIGHWAY VV BROSELEY MO 63932-9174  CEDARCREST MANOR 324 WEST 5TH ST WASHINGTON Mailing Address 324 WEST 5TH ST WASHINGTON MO 63090-2306  CEDARGATE HEALTHCARE 2350 KANELL BLVD POPLAR BLUFF MO 63901-4036  Mailing Address 2350 KANELL BLVD POPLAR BLUFF MO 63901-4036	Level of Care: RCF County BUTLER Region 2  TEMPORARY CLC Telephone (636) 239-7848 Level of Care: SNF County FRANKLIN Region 6 Medicare/Medicaid  Telephone (573) 785-0188 Level of Care: ALF County BUTLER	Bed Capacity DMH Licensed Facility Number  DSURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	10 Yes 08923 Yes 177 No 01160
BROSELEY Mailing Address 286 HIGHWAY VV BROSELEY MO 63932-9174  CEDARCREST MANOR 324 WEST 5TH ST WASHINGTON Mailing Address 324 WEST 5TH ST WASHINGTON MO 63090-2306  CEDARGATE HEALTHCARE 2350 KANELL BLVD POPLAR BLUFF MO 63901-4036  Mailing Address 2350 KANELL BLVD POPLAR BLUFF MO 63901-4036  CEDARGATE HEALTHCARE  CEDARGATE HEALTHCARE  MO 63901-4036	Level of Care: RCF County BUTLER Region 2  TEMPORARY CLC Telephone (636) 239-7848 Level of Care: SNF County FRANKLIN Region 6 Medicare/Medicaid  Telephone (573) 785-0188 Level of Care: ALF County BUTLER Region 2	Bed Capacity DMH Licensed Facility Number  DSURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	10 Yes 08923 Yes 177 No 01160
BROSELEY Mailing Address 286 HIGHWAY VV BROSELEY MO 63932-9174  CEDARCREST MANOR 324 WEST 5TH ST WASHINGTON Mailing Address 324 WEST 5TH ST WASHINGTON MO 63090-2306  CEDARGATE HEALTHCARE 2350 KANELL BLVD POPLAR BLUFF MO 63901-4036  Mailing Address 2350 KANELL BLVD POPLAR BLUFF MO 63901-4036  CEDARGATE HEALTHCARE 2350 KANELL BLVD  CEDARGATE HEALTHCARE 2350 KANELL BLVD	Level of Care: RCF County BUTLER Region 2  TEMPORARY CLC Telephone (636) 239-7848 Level of Care: SNF County FRANKLIN Region 6 Medicare/Medicaid  Telephone (573) 785-0188 Level of Care: ALF County BUTLER Region 2  Telephone (573) 785-0188	Bed Capacity DMH Licensed Facility Number  DSURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	10 Yes 08923 Yes 177 No 01160 No 16 No 01182
BROSELEY Mailing Address 286 HIGHWAY VV BROSELEY MO 63932-9174  CEDARCREST MANOR 324 WEST 5TH ST WASHINGTON Mailing Address 324 WEST 5TH ST WASHINGTON MO 63090-2306  CEDARGATE HEALTHCARE 2350 KANELL BLVD POPLAR BLUFF MO 63901-4036  MO 63901-4036  CEDARGATE HEALTHCARE  2350 KANELL BLVD POPLAR BLUFF MO 63901-4036  CEDARGATE HEALTHCARE 2350 KANELL BLVD POPLAR BLUFF MO 63901-4036	Level of Care: RCF County BUTLER Region 2  TEMPORARY CLO Telephone (636) 239-7848 Level of Care: SNF County FRANKLIN Region 6 Medicare/Medicaid  Telephone (573) 785-0188 Level of Care: ALF County BUTLER Region 2  Telephone (573) 785-0188 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  DSURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	10 Yes 08923  Yes 177 No 01160  No 16 No 01182
BROSELEY Mailing Address 286 HIGHWAY VV BROSELEY MO 63932-9174  CEDARCREST MANOR 324 WEST 5TH ST WASHINGTON Mailing Address 324 WEST 5TH ST WASHINGTON MO 63090-2306  CEDARGATE HEALTHCARE 2350 KANELL BLVD POPLAR BLUFF MO 63901-4036  Mailing Address 2350 KANELL BLVD POPLAR BLUFF MO 63901-4036  CEDARGATE HEALTHCARE 2350 KANELL BLVD  CEDARGATE HEALTHCARE 2350 KANELL BLVD	Level of Care: RCF County BUTLER Region 2  TEMPORARY CLC Telephone (636) 239-7848 Level of Care: SNF County FRANKLIN Region 6 Medicare/Medicaid  Telephone (573) 785-0188 Level of Care: ALF County BUTLER Region 2  Telephone (573) 785-0188	Bed Capacity DMH Licensed Facility Number  DSURE - STAFFING Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	10 Yes 08923 Yes 177 No 01160 No 16 No 01182

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CEDARHURST OF ARNOLD			
2069 MISSOURI STATE ROAD	<b>Telephone</b> (636) 333-2715	Alzheimer's Unit	Yes
ARNOLD MO 63010-4809	Level of Care: ALF**	Bed Capacity	84
Mailing Address 2069 MISSOURI STATE ROAD	County JEFFERSON	DMH Licensed	No
ARNOLD MO 63010-4809	Region 2	<b>Facility Number</b>	32428
CEDARHURST OF BLUE SPRINGS			
20551 E TRINITY PLACE	<b>Telephone</b> (816) 685-8863	Alzheimer's Unit	Yes
BLUE SPRINGS MO 64015-9501	Level of Care: ALF**	Bed Capacity	89
Mailing Address 20551 E TRINITY PLACE	County JACKSON	DMH Licensed	No
BLUE SPRINGS MO 64015-9501	Region 3	Facility Number	31581
BEOL SI KINGS	Region 5	Pacinty Number	31361
CEDARHURST OF COLUMBIA			
2333 CHAPEL HILL RD	<b>Telephone</b> (573) 234-1091	Alzheimer's Unit	Yes
COLUMBIA MO 65203-1537	Level of Care: ALF**	Bed Capacity	127
Mailing Address 2333 CHAPEL HILL RD	County BOONE	DMH Licensed	No
_	•		
COLUMBIA MO 65203-1537	Region 6	Facility Number	29874
CEDARHURST OF DES PERES			
12826 DAYLIGHT CIRCLE	<b>Telephone</b> (314) 384-3654	Alzheimer's Unit	Yes
SAINT LOUIS MO 63131-1890	Level of Care: ALF**	Bed Capacity	76
Mailing Address 12826 DAYLIGHT CIRCLE	20,01010101	DMH Licensed	No
SAINT LOUIS MO 63131-1890			
SAINT LOUIS MO 03131-1890	Region 7	Facility Number	30351
CEDARHURST OF FARMINGTON			
200 MAPLE VALLEY DRIVE	<b>Telephone</b> (573) 713-9150	Alzheimer's Unit	Yes
FARMINGTON MO 63640-7331	Level of Care: ALF**	Bed Capacity	84
Mailing Address 200 MAPLE VALLEY DRIVE	County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON MO 63640-7331	Region 2	Facility Number	32159
	region -		3213)
CEDARHURST OF LEBANON ASSISTED LIVING & MEMORY	CARE		
842 LYNN STREET	<b>Telephone</b> (417) 815-0122	Alzheimer's Unit	Yes
LEBANON MO 65536-3832	Level of Care: ALF**	Bed Capacity	90
Mailing Address 842 LYNN STREET	County LACLEDE	DMH Licensed	No
LEBANON MO 65536-3832	Region 1	Facility Number	31890
CEDARHURST OF SEDALIA			
CEDARHURST OF SEDALIA 3761 WEST 10TH ST	<b>Telephone</b> (660) 827-8900	Alzheimer's Unit	No
	<b>Telephone</b> (660) 827-8900 <b>Level of Care:</b> ALF**	Alzheimer's Unit Bed Capacity	No 90
3761 WEST 10TH ST			
3761 WEST 10TH ST SEDALIA MO 65301-2524	Level of Care: ALF**	<b>Bed Capacity</b>	90
3761 WEST 10TH ST SEDALIA MO 65301-2524  Mailing Address 3761 WEST 10TH ST SEDALIA MO 65301-2524	Level of Care: ALF** County PETTIS	Bed Capacity DMH Licensed	90 No
3761 WEST 10TH ST SEDALIA MO 65301-2524 Mailing Address 3761 WEST 10TH ST SEDALIA MO 65301-2524  CEDARHURST OF SPRINGFIELD	Level of Care: ALF** County PETTIS Region 6	Bed Capacity DMH Licensed Facility Number	90 No 25967
3761 WEST 10TH ST  SEDALIA  Mo 65301-2524  Mailing Address 3761 WEST 10TH ST  SEDALIA  MO 65301-2524  CEDARHURST OF SPRINGFIELD  1146 EAST LAKEWOOD ST	Level of Care: ALF** County PETTIS Region 6  Telephone (417) 885-9050	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	90 No 25967 Yes
3761 WEST 10TH ST SEDALIA MO 65301-2524 Mailing Address 3761 WEST 10TH ST SEDALIA MO 65301-2524  CEDARHURST OF SPRINGFIELD 1146 EAST LAKEWOOD ST SPRINGFIELD MO 65810-2614	Level of Care: ALF** County PETTIS Region 6  Telephone (417) 885-9050 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	90 No 25967 Yes 66
3761 WEST 10TH ST  SEDALIA  Mo 65301-2524  Mailing Address 3761 WEST 10TH ST  SEDALIA  MO 65301-2524  CEDARHURST OF SPRINGFIELD  1146 EAST LAKEWOOD ST	Level of Care: ALF** County PETTIS Region 6  Telephone (417) 885-9050	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	90 No 25967 Yes

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CED A DANABOTE OF CITA DA FIG. AA				
	SSISTED LIVING & MEMORY CARE	T		
1800 FIRST CAPITOL DRIVE	MO (2201 1646	<b>Telephone</b> (636) 255-8094	Alzheimer's Unit Ye	
SAINT CHARLES	MO 63301-1646	Level of Care: ALF**	Bed Capacity 15	
Mailing Address 1800 FIRST CAPITOL		County SAINT CHARLES		No.
SAINT CHARLES	MO 63301-1646	Region 5	Facility Number 3067	0
CEDARHURST OF TESSON HEIGH	TS			
12335 WEST BEND DR		<b>Telephone</b> (314) 849-1366	Alzheimer's Unit N	Ю
SAINT LOUIS	MO 63128-2160	Level of Care: ALF**	Bed Capacity 7	79
Mailing Address 12335 WEST BEND I	OR .	County SAINT LOUIS COUNTY	DMH Licensed N	Ю
SAINT LOUIS	MO 63128-2160	Region 7	Facility Number 1366	53
CEDARHURST OF WEST PLAINS				
1521 US HIGHWAY 63		<b>Telephone</b> (417) 372-8940	Alzheimer's Unit YE	ES
WEST PLAINS	MO 65775-9809	Level of Care: ALF**	Bed Capacity 8	34
Mailing Address 1521 US HIGHWAY 6	53	County HOWELL	DMH Licensed N	lо
WEST PLAINS	MO 65775-9809	Region 1	Facility Number 3202	28
CEDARS OF LIBERTY HEALTH CA	DE CENTED			
200 WEST RUTH EWING RD	RE CENTER	<b>Telephone</b> (816) 781-7600	Alzheimer's Unit N	lо
LIBERTY	MO 64068-9496	Level of Care: RCF*	Bed Capacity 20	
Mailing Address 200 WEST RUTH EW		County CLAY	DMH Licensed Ye	
LIBERTY	MO 64068-9496	Region 4	Facility Number 1385	
	110 01000 7170	Region .	Tuenty (tunise)	<i>'</i> -T
CENTRAL GARDENS INC				
302 NORTH ELM ST		<b>Telephone</b> (573) 624-0011		Ю
DEXTER	MO 63841-1773	Level of Care: RCF*		33
Mailing Address 302 NORTH ELM ST		County STODDARD		Ю
DEXTER	MO 63841-1773	Region 2	Facility Number 1885	58
CENTRAL RESIDENCE, THE				
5143 WATERMAN BLVD		<b>Telephone</b> (314) 367-5620	Alzheimer's Unit N	lo
SAINT LOUIS	MO 63108-1103	Level of Care: RCF*	Bed Capacity 4	41
Mailing Address 5143 WATERMAN B	LVD	County SAINT LOUIS CITY	DMH Licensed Ye	es
SAINT LOUIS	MO 63108-1103	Region 7	Facility Number 0278	35
CENTURY PINES ASSISTED LIVING	G			
709 EAST MCCRACKEN RD		<b>Telephone</b> (417) 581-7278	Alzheimer's Unit	Ю
OZARK	MO 65721-9499	Level of Care: ALF	Bed Capacity 5	58
Mailing Address 709 EAST MCCRACE	KEN RD	County CHRISTIAN	DMH Licensed Ye	es
OZARK	MO 65721-9499	Region 1	Facility Number 0120	)()
CENTURY PINES ASSISTED LIVING	G			
709 EAST MCCRACKEN RD		<b>Telephone</b> (417) 581-7278	Alzheimer's Unit N	Ю
OZARK	MO 65721-9499	Level of Care: ALF**	Bed Capacity 1	18
Mailing Address 709 EAST MCCRACE	KEN RD	County CHRISTIAN	DMH Licensed N	lо
OZARK	MO 65721-9499	Region 1	Facility Number 0120	)()

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CHAFFEE NURSING CENTER			
12273 STATE HIGHWAY 77		<b>Telephone</b> (573) 887-3615	Alzheimer's Unit No
CHAFFEE	MO 63740-8219	Level of Care: SNF	<b>Bed Capacity</b> 71
Mailing Address 12273 STATE HIGHW	VAY 77	County SCOTT	<b>DMH Licensed</b> No
CHAFFEE	MO 63740-8219	Region 2 Medicare/Medicaid	Facility Number 13652
CHARITON PARK HEALTH CARE	CENTER		
902 MANOR DR		<b>Telephone</b> (660) 388-6486	Alzheimer's Unit No
SALISBURY	MO 65281-1236	Level of Care: SNF	Bed Capacity 120
Mailing Address 902 MANOR DR	1110 00201 1200	County CHARITON	DMH Licensed No
SALISBURY	MO 65281-1236	Region 5 Medicare/Medicaid	Facility Number 06469
S. IEISBERT	110 03201 1230	Region 5 Wedicare/Medicard	racinty runner 0040)
ON A DY ESTEON MANOR			
CHARLESTON MANOR 1220 EAST MARSHALL		<b>Telephone</b> (573) 683-3721	Alzheimer's Unit Yes
	MO 62924 1240	• '	
CHARLESTON	MO 63834-1349	Level of Care: SNF	Bed Capacity 120
Mailing Address 1220 EAST MARSHA		County MISSISSIPPI	DMH Licensed No
CHARLESTON	MO 63834-1349	Region 2 Medicare/Medicaid	Facility Number 01251
CHA (DELAH) ANNI PAA DAY			
CHATEAU ANN MARIE			
7700 MINNESOTA AVE		<b>Telephone</b> (314) 449-1497	Alzheimer's Unit No
SAINT LOUIS	MO 63111-3336	Level of Care: ALF	Bed Capacity 22
Mailing Address 7700 MINNESOTA A		County SAINT LOUIS CITY	<b>DMH Licensed</b> Yes
SAINT LOUIS	MO 63111-3336	Region 7	Facility Number 14711
CHATEAN CIRABBEAN			
CHATEAU GIRARDEAU		T. I. 1 (572) 225 1201	A11. 1 TT 4
3120 INDEPENDENCE ST	1.00 (0.00 0.00	<b>Telephone</b> (573) 335-1281	Alzheimer's Unit No
CAPE GIRARDEAU	MO 63703-5043	Level of Care: ALF**	Bed Capacity 55
Mailing Address 3120 INDEPENDENC		County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63703-5043	Region 2	Facility Number 01386
CHATEAU GIRARDEAU			
3120 INDEPENDENCE ST		<b>Telephone</b> (573) 335-1281	Alzheimer's Unit No
CAPE GIRARDEAU	MO 63703-5043	Level of Care: SNF	Bed Capacity 75
Mailing Address 3120 INDEPENDENC		County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63703-5043	Region 2 Medicare/Medicaid	Facility Number 01386
CHEROKEE RESIDENTIAL CARE A	ACQUISITION LLC		
3409 MISSOURI AVE	ic Colorino, LDC	<b>Telephone</b> (314) 771-8360	Alzheimer's Unit No
SAINT LOUIS	MO 63118-3236	Level of Care: RCF*	Bed Capacity 30
			DMH Licensed Yes
Mailing Address 3409 MISSOURI AVE		County SAINT LOUIS CITY	
SAINT LOUIS	MO 63118-3236	Region 7	Facility Number 14047
CHESTERFIELD VILLAS			
14901 N OUTER 40 RD		<b>Telephone</b> (636) 532-9296	Alzheimer's Unit No
CHESTERFIELD	MO 63017-6034	Level of Care: ALF	Bed Capacity 52
Mailing Address 14901 N OUTER 40 R		County SAINT LOUIS COUNTY	DMH Licensed No
CHESTERFIELD	MO 63017-6034	·	Facility Number 29067
CHED LEM ILLD	1710 03017-0034	Region 7	29007

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CHESTNUT GLENN - ASSISTED L	IVING BY AMERICARE			
121 KLONDIKE CROSSING		<b>Telephone</b> (636) 928-4200	Alzheimer's Unit	Yes
SAINT PETERS	MO 63376-5394	Level of Care: ALF**	<b>Bed Capacity</b>	74
Mailing Address 121 KLONDIKE CR	OSSING	County SAINT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-5394	Region 5	Facility Number	25446
CHESTNUT REHAB AND NURSING	C.			
10954 KENNERLY RD	G	<b>Telephone</b> (314) 843-4242	Alzheimer's Unit	No
SAINT LOUIS	MO 63128-2018	Level of Care: SNF	Bed Capacity	167
Mailing Address 10954 KENNERLY		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63128-2018	Region 7 Medicare/Medicaid	Facility Number	03182
SAINT LOOIS	WO 03128-2016	Region / Medicare/Medicaid	racinty Number	03162
CHRISTIAN EXTENDED CARE &	REHABILITATION			
11160 VILLAGE NORTH DR		<b>Telephone</b> (314) 355-8010	Alzheimer's Unit	No
SAINT LOUIS	MO 63136-6159	Level of Care: SNF	Bed Capacity	60
Mailing Address 11160 VILLAGE NO		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63136-6159	Region 7 Medicare/Medicaid	Facility Number	08300
CHURCHILL TERRACE - ASSISTE	ED LIVING BY AMERICARE			
120 HOSPITAL DR		<b>Telephone</b> (573) 642-5222	Alzheimer's Unit	No
FULTON	MO 65251-2511	Level of Care: ALF**	<b>Bed Capacity</b>	57
Mailing Address 120 HOSPITAL DR		County CALLAWAY	DMH Licensed	No
FULTON	MO 65251-2511	Region 6	Facility Number	20783
CITIZENS MEMORIAL HEALTH O	CARE FACILITY			
1218 W LOCUST ST		<b>Telephone</b> (417) 326-7648	Alzheimer's Unit	No
BOLIVAR	MO 65613-1312	Level of Care: SNF	Bed Capacity	111
Mailing Address PO BOX 590	110 00010 1012	County POLK	DMH Licensed	No
BOLIVAR	MO 65613-0590	Region 1 Medicare/Medicaid	Facility Number	00710
		region - Medicard/Medicard		00710
ar . P				
CLARA MANOR NURSING HOME		T. I		
3621 WARWICK BLVD	MO	<b>Telephone</b> (816) 756-1593	Alzheimer's Unit	No
KANSAS CITY	MO 64111-1403	Level of Care: SNF	Bed Capacity	90
Mailing Address 3621 WARWICK BL		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64111-1403	Region 3 Medicaid	Facility Number	14102
CLARENCE CARE CENTER				
111 EAST ST		<b>Telephone</b> (660) 699-2118	Alzheimer's Unit	No
CLARENCE	MO 63437-1902	Level of Care: SNF	<b>Bed Capacity</b>	60
Mailing Address 111 EAST ST		County SHELBY	DMH Licensed	No
CLARENCE	MO 63437-1902	Region 5 Medicare/Medicaid	<b>Facility Number</b>	01475
CLARENDALE CLAYTON				
7651 CLAYTON ROAD		<b>Telephone</b> (314) 390-9399	Alzheimer's Unit	YES
CLAYTON	MO 63317-1419	Level of Care: ALF**	Bed Capacity	98
Mailing Address 7651 CLAYTON RO	OAD	County SAINT LOUIS COUNTY	DMH Licensed	No
CLAYTON	MO 63317-1419	Region 7	Facility Number	32528
		=		

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CLARENDALE OF ST PETERS		m	
10 DUBRAY DRIVE	MO (227/ 2559	<b>Telephone</b> (636)706-5100	Alzheimer's Unit yes
SAINT PETERS	MO 63376-3558	Level of Care: ALF**	Bed Capacity 110
Mailing Address 10 DUBRAY DRIVE	MO 62276 2559	County SAINT CHARLES	DMH Licensed No
SAINT PETERS	MO 63376-3558	Region 5	Facility Number 32095
CLARK CARE CENTER - ONE			
1505 EAST ASHLAND ST		<b>Telephone</b> (417) 667-3900	Alzheimer's Unit No
NEVADA	MO 64772-4025	Level of Care: RCF*	Bed Capacity 38
Mailing Address PO BOX 246	1110 01772 1020	County VERNON	DMH Licensed Yes
NEVADA	MO 64772-0246	Region 1	Facility Number 20206
CLARK COUNTY NURSING HOME		T. I. I. (CCO) 707 2202	A11 '
1260 N JOHNSON ST	MO 62445 1100	<b>Telephone</b> (660) 727-3303	Alzheimer's Unit No
KAHOKA	MO 63445-1100	Level of Care: RCF*	Bed Capacity 22
Mailing Address 1260 N JOHNSON ST		County CLARK	DMH Licensed No
КАНОКА	MO 63445-1100	Region 5	Facility Number 01480
CLARK COUNTY NURSING HOME			
1260 N JOHNSON ST		<b>Telephone</b> (660) 727-3303	Alzheimer's Unit No
KAHOKA	MO 63445-1100	Level of Care: SNF	Bed Capacity 103
Mailing Address 1260 N JOHNSON ST	Γ	County CLARK	DMH Licensed No
KAHOKA	MO 63445-1100	Region 5 Medicare/Medicaid	Facility Number 01480
CLARK'S MOUNTAIN NURSING CH	ENTER		
2100 BARNES		<b>Telephone</b> (573) 223-4297	Alzheimer's Unit No
PIEDMONT	MO 63957-1008	Level of Care: SNF	Bed Capacity 91
Mailing Address 2100 BARNES	110 (2057 1000	County WAYNE	DMH Licensed No
PIEDMONT	MO 63957-1008	Region 2 Medicare/Medicaid	Facility Number 01496
CLARU DEVILLE NURSING CENTI	ER		
105 SPRUCE ST		<b>Telephone</b> (573) 783-3993	Alzheimer's Unit Yes
FREDERICKTOWN	MO 63645-1002	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 105 SPRUCE ST		County MADISON	DMH Licensed No
FREDERICKTOWN	MO 63645-1002	Region 2 Medicare/Medicaid	Facility Number 17527
CLEADVIEW MUDGING CENTEED			
CLEARVIEW NURSING CENTER		TD 1 1 25.65	AN A COLUMN TO MA
430 SALCEDO ROAD	MO 62901 4902	<b>Telephone</b> (573) 471-2565	Alzheimer's Unit No
SIKESTON  Mailing Address DO BOY 707	MO 63801-4802	Level of Care: SNF	Bed Capacity 98
Mailing Address PO BOX 707 SIKESTON	MO 63801-0707	County SCOTT  Pagion 2 Medicare/Medicaid	DMH Licensed No Encility Number 10012
SINESTON	1410 03001-0707	Region 2 Medicare/Medicaid	Facility Number 19913
CLINTON HEALTHCARE AND REF	HABILITATION CENTER		
1009 EAST OHIO		<b>Telephone</b> (660) 885-5571	Alzheimer's Unit No
CLINTON	MO 64735-2455	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 1009 EAST OHIO		County HENRY	<b>DMH Licensed</b> No

Medicare/Medicaid

**Facility Number** 

01318

MO 64735-2455

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COATES STREET COMFORT HOU	CE		
612 WEST COATES ST	SE	<b>Telephone</b> (660) 263-6759	Alzheimer's Unit No
MOBERLY	MO 65270-1319	Level of Care: RCF	Bed Capacity 20
Mailing Address PO BOX 781		County RANDOLPH	DMH Licensed Yes
MOBERLY	MO 65270-0781	Region 5	Facility Number 08220
		o a constant of the constant o	
COLLIER CARE HOME, INC			
3001 NW VESPER ST		<b>Telephone</b> (816) 229-6231	Alzheimer's Unit No
BLUE SPRINGS	MO 64015-3104	Level of Care: RCF*	<b>Bed Capacity</b> 15
Mailing Address 3001 NW VESPER S	Т	<b>County</b> JACKSON	<b>DMH Licensed</b> Yes
BLUE SPRINGS	MO 64015-3104	Region 3	Facility Number 01591
COLONIAL HOME THE			
COLONIAL HOME, THE 102 SUMMIT ST		<b>Telephone</b> (573) 996-4283	Alzheimer's Unit No
DONIPHAN	MO 63935-1328	Level of Care: ALF**	Bed Capacity 31
Mailing Address 102 SUMMIT ST	N10 03733 1320	County RIPLEY	DMH Licensed No
DONIPHAN	MO 63935-1328	Region 2	Facility Number 01610
		Region 2	1 temsy 1 temses 01010
COLONIAL HOUSE OF FESTUS I			
500 SUNSHINE DR		<b>Telephone</b> (636) 937-7140	Alzheimer's Unit No
FESTUS	MO 63028-1645	Level of Care: RCF	<b>Bed Capacity</b> 30
Mailing Address 500 SUNSHINE DR		County JEFFERSON	<b>DMH Licensed</b> Yes
FESTUS	MO 63028-1645	Region 2	Facility Number 00726
COLONIAL MANOR, LLC			
907 WEST MALONE ST		<b>Telephone</b> (573) 471-5541	Alzheimer's Unit No
SIKESTON	MO 63801-2425	Level of Care: ALF	Bed Capacity 20
Mailing Address 907 WEST MALONE		County SCOTT	DMH Licensed Yes
SIKESTON	MO 63801-2425	Region 2	Facility Number 13255
		Region -	13233
COLONIAL RESIDENTIAL CARE I	FACILITY II		
1162 CEDAR ST		<b>Telephone</b> (573) 734-2846	Alzheimer's Unit No
BISMARCK	MO 63624-8920	<b>Level of Care:</b> RCF*	<b>Bed Capacity</b> 48
Mailing Address PO BOX 134		County SAINT FRANCOIS	<b>DMH Licensed</b> Yes
MOUNTAIN GROVE	MO 65711-0134	Region 2	Facility Number 01693
COLONIAL SPRINGS HEALTHCA	RE CENTER		
750 W COOPER ST		<b>Telephone</b> (417) 345-2228	Alzheimer's Unit Yes
BUFFALO	MO 65622-8662	Level of Care: SNF	Bed Capacity 134
Mailing Address PO BOX 978		County DALLAS	DMH Licensed No
BUFFALO	MO 65622-0978	Region 1 Medicare/Medicaid	Facility Number 01302
COLONY POINTE-ASSISTED LIVE	NC RV AMEDICADE		
1510 CHAPEL HILL RD	NG DI AMERICARE	<b>Telephone</b> (573) 234-1193	Alzheimer's Unit Yes
COLUMBIA	MO 65203-5457	Level of Care: ALF**	Bed Capacity 59
Mailing Address 1510 CHAPEL HILL		County BOONE	DMH Licensed No
COLUMBIA	MO 65203-5457	Region 6	Facility Number 28191
		· o- *	

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COLUMBIA MANOR CARE CENTE	ER		
2012 NIFONG BLVD		<b>Telephone</b> (573) 449-1246	Alzheimer's Unit No
COLUMBIA	MO 65201-3874	Level of Care: SNF	<b>Bed Capacity</b> 52
Mailing Address 2012 NIFONG BLVD	)	County BOONE	<b>DMH Licensed</b> No
COLUMBIA	MO 65201-3874	Region 6 Medicare/Medicaid	Facility Number 01715
COLUMBIA POST ACUTE			
3535 BERRYWOOD DRIVE		<b>Telephone</b> (573) 397-7144	Alzheimer's Unit No
COLUMBIA	MO 65201-6584	Level of Care: SNF	<b>Bed Capacity</b> 70
Mailing Address 3535 BERRYWOOD	DRIVE	County BOONE	<b>DMH Licensed</b> No
COLUMBIA	MO 65201-6584	Region 6 Medicare/Medicaid	Facility Number 30959
	Y GARE COMMENTAL C		
COLUMBIA STREET RESIDENTIA	L CARE CENTER LLC	T-1	Al-lesion and Timita No.
208 WEST COLUMBIA ST	MO 62640 1705	Telephone (573) 756-7481 Level of Care: RCF	Alzheimer's Unit No Bed Capacity 16
FARMINGTON Moiling Address DO DOV 272	MO 63640-1705		Bed Capacity 16 DMH Licensed Yes
Mailing Address PO BOX 272 FARMINGTON	MO 62640 0675	•	
FARMINGTON	MO 63640-0675	Region 2	Facility Number 01729
COMMUNITIES OF WILDWOOD R	AANCH		
3222 SOUTH JOHN DUFFY DR		<b>Telephone</b> (417) 621-0175	Alzheimer's Unit No
JOPLIN	MO 64804-1569	Level of Care: SNF	Bed Capacity 120
Mailing Address 3222 SOUTH JOHN	DUFFY DR	County JASPER	DMH Licensed No
JOPLIN	MO 64804-1569	Region 1 Medicare/Medicaid	Facility Number 29077
			•
COMMUNITY CARE CENTER OF I	LEMAY, INC		
9353 SOUTH BROADWAY		<b>Telephone</b> (314) 631-0540	Alzheimer's Unit No
SAINT LOUIS	MO 63125-1600	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address 9353 SOUTH BROAD	DWAY	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63125-1600	Region 7 Medicare/Medicaid	Facility Number 01732
COMMUNITY MANOR			
783 WEBER ROAD		<b>Telephone</b> (573) 756-8998	Alzheimer's Unit No
FARMINGTON	MO 63640-3318	Level of Care: SNF	Bed Capacity 99
Mailing Address 783 WEBER RD	110 03040 3310	County SAINT FRANCOIS	DMH Licensed No
FARMINGTON	MO 63640-3318	Region 2 Medicare/Medicaid	Facility Number 13887
THUM (OTO)	MO 03010 3310	Region 2 Medicare/Medicard	ruenty rumber 15007
COMMUNITY OF AUTUMN COUR	T AT MT VERNON, THE		
1421 S LANDRUM ST		<b>Telephone</b> (417) 466-3549	Alzheimer's Unit No
MOUNT VERNON	MO 65712-1912	Level of Care: ALF**	Bed Capacity 34
Mailing Address 1421 S LANDRUM S	ST	County LAWRENCE	<b>DMH Licensed</b> No
MOUNT VERNON	MO 65712-1912	Region 1	Facility Number 20809
COMMUNITY SPRINGS HEALTHO	'ARE FACILITY		
400 EAST HOSPITAL RD	AND PROBLEM	<b>Telephone</b> (417) 876-2531	Alzheimer's Unit Yes
EL DORADO SPRINGS	MO 64744-2024	Level of Care: SNF	Bed Capacity 120
Mailing Address 400 EAST HOSPITAL		County CEDAR	DMH Licensed No
EL DORADO SPRINGS	MO 64744-2024	Region 1 Medicare/Medicaid	Facility Number 01740
LL DOM DO DI MINOS	110 07/77 2027	region i Medical e/Medicald	1 acmity 110mber 01/40

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CONVERSE HOME				
17025 OLD JAMESTOWN RD		<b>Telephone</b> (314) 355-8041	Alzheimer's Unit	No
FLORISSANT	MO 63034-1414	Level of Care: RCF	Bed Capacity	12
Mailing Address 17025 OLD JAMESTO		County SAINT LOUIS COUNTY	DMH Licensed	Yes
FLORISSANT	MO 63034-1414	Region 7	Facility Number	01777
GO OPER WOVER				
COOPER HOUSE		m		
4385 MARYLAND AVE	MO 62100 2702	<b>Telephone</b> (314) 535-1919	Alzheimer's Unit	No
SAINT LOUIS	MO 63108-2703	Level of Care: RCF*	Bed Capacity	36
Mailing Address 4385 MARYLAND AV		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63108-2703	Region 7	Facility Number	21439
COPPER ROCK HEALTHCARE				
712 COPPER ROCK DRIVE		<b>Telephone</b> (417) 202-4606	Alzheimer's Unit	No
ROGERSVILLE	MO 65742-8970	Level of Care: SNF	Bed Capacity	90
Mailing Address PO BOX 560		County WEBSTER	DMH Licensed	No
ROGERSVILLE	MO 65742-8970	Region 1 Medicare/Medicaid	Facility Number	31851
NO ODAS ( IDEE		region 1 Medicare/Medicard	Tuesday Transpor	31031
CORI MANOR HEALTHCARE & RE	CHABILITATION CENTER			
560 CORISANDE HILLS RD		<b>Telephone</b> (636) 343-2282	Alzheimer's Unit	No
FENTON	MO 63026-5613	Level of Care: SNF	<b>Bed Capacity</b>	144
Mailing Address 560 CORISANDE HIL	LS RD	County JEFFERSON	DMH Licensed	No
FENTON	MO 63026-5613	Region 2 Medicare/Medicaid	Facility Number	01800
COTTAGES OF LAKE ST LOUIS				
COTTAGES OF LAKE ST LOUIS 2885 TECHNOLOGY DRIVE		<b>Telephone</b> (636) 614-3510	Alzheimer's Unit	No
	MO 63367-4123	<b>Telephone</b> (636) 614-3510 <b>Level of Care:</b> SNF	Alzheimer's Unit Bed Capacity	No 60
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS Mailing Address 2885 TECHNOLOGY	DRIVE	Level of Care: SNF County SAINT CHARLES	Bed Capacity DMH Licensed	
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS		Level of Care: SNF	Bed Capacity	60
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS	DRIVE	Level of Care: SNF County SAINT CHARLES	Bed Capacity DMH Licensed	60 No
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS  COTTON POINT LIVING CENTER	DRIVE	Level of Care: SNF County SAINT CHARLES Region 5 Medicare	Bed Capacity DMH Licensed Facility Number	60 No 30318
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS  COTTON POINT LIVING CENTER 609 SOUTH RAILROAD ST	DRIVE MO 63367-4123	Level of Care: SNF County SAINT CHARLES Region 5 Medicare  Telephone (573) 471-7861	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	60 No 30318 Yes
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS  COTTON POINT LIVING CENTER 609 SOUTH RAILROAD ST MATTHEWS	DRIVE MO 63367-4123 MO 63867-9751	Level of Care: SNF County SAINT CHARLES Region 5 Medicare  Telephone (573) 471-7861 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	60 No 30318 Yes 98
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS  COTTON POINT LIVING CENTER 609 SOUTH RAILROAD ST MATTHEWS Mailing Address 609 SOUTH RAILROAD	DRIVE MO 63367-4123 MO 63867-9751 AD ST	Level of Care: SNF County SAINT CHARLES Region 5 Medicare  Telephone (573) 471-7861 Level of Care: SNF County NEW MADRID	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	60 No 30318 Yes 98 No
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS  COTTON POINT LIVING CENTER 609 SOUTH RAILROAD ST MATTHEWS	DRIVE MO 63367-4123 MO 63867-9751	Level of Care: SNF County SAINT CHARLES Region 5 Medicare  Telephone (573) 471-7861 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	60 No 30318 Yes 98
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS  COTTON POINT LIVING CENTER 609 SOUTH RAILROAD ST MATTHEWS Mailing Address 609 SOUTH RAILROAD	DRIVE MO 63367-4123 MO 63867-9751 AD ST	Level of Care: SNF County SAINT CHARLES Region 5 Medicare  Telephone (573) 471-7861 Level of Care: SNF County NEW MADRID	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	60 No 30318 Yes 98 No
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS  COTTON POINT LIVING CENTER 609 SOUTH RAILROAD ST MATTHEWS Mailing Address 609 SOUTH RAILROAMATTHEWS	DRIVE MO 63367-4123 MO 63867-9751 AD ST	Level of Care: SNF County SAINT CHARLES Region 5 Medicare  Telephone (573) 471-7861 Level of Care: SNF County NEW MADRID	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	60 No 30318 Yes 98 No
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS  COTTON POINT LIVING CENTER 609 SOUTH RAILROAD ST MATTHEWS Mailing Address 609 SOUTH RAILROAMATTHEWS COUNTRY AIRE ESTATES, LLC	DRIVE MO 63367-4123 MO 63867-9751 AD ST	Level of Care: SNF County SAINT CHARLES Region 5 Medicare  Telephone (573) 471-7861 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 30318 Yes 98 No 07057
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS  Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS  COTTON POINT LIVING CENTER 609 SOUTH RAILROAD ST MATTHEWS Mailing Address 609 SOUTH RAILROA MATTHEWS  COUNTRY AIRE ESTATES, LLC 49303 RENSSELAER LN	DRIVE MO 63367-4123  MO 63867-9751 AD ST MO 63867-9751  MO 63401-7356	Level of Care: SNF County SAINT CHARLES Region 5 Medicare  Telephone (573) 471-7861 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid  Telephone (573) 221-5400	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 30318 Yes 98 No 07057
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS  Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS  COTTON POINT LIVING CENTER 609 SOUTH RAILROAD ST MATTHEWS  Mailing Address 609 SOUTH RAILROA MATTHEWS  COUNTRY AIRE ESTATES, LLC 49303 RENSSELAER LN HANNIBAL	DRIVE MO 63367-4123  MO 63867-9751 AD ST MO 63867-9751  MO 63401-7356	Level of Care: SNF County SAINT CHARLES Region 5 Medicare  Telephone (573) 471-7861 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid  Telephone (573) 221-5400 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	60 No 30318 Yes 98 No 07057
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS  Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS  COTTON POINT LIVING CENTER 609 SOUTH RAILROAD ST MATTHEWS  Mailing Address 609 SOUTH RAILROA MATTHEWS  COUNTRY AIRE ESTATES, LLC 49303 RENSSELAER LN HANNIBAL  Mailing Address 49303 RENSSELAER HANNIBAL	DRIVE MO 63367-4123  MO 63867-9751 AD ST MO 63867-9751  MO 63401-7356 LN MO 63401-7356	Level of Care: SNF County SAINT CHARLES Region 5 Medicare  Telephone (573) 471-7861 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid  Telephone (573) 221-5400 Level of Care: RCF* County RALLS	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	60 No 30318 Yes 98 No 07057
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS  Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS  COTTON POINT LIVING CENTER 609 SOUTH RAILROAD ST MATTHEWS  Mailing Address 609 SOUTH RAILROA MATTHEWS  COUNTRY AIRE ESTATES, LLC 49303 RENSSELAER LN HANNIBAL  Mailing Address 49303 RENSSELAER HANNIBAL  COUNTRY AIRE RETIREMENT CEI	DRIVE MO 63367-4123  MO 63867-9751 AD ST MO 63867-9751  MO 63401-7356 LN MO 63401-7356	Level of Care: SNF County SAINT CHARLES Region 5 Medicare  Telephone (573) 471-7861 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid  Telephone (573) 221-5400 Level of Care: RCF* County RALLS Region 5	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 30318 Yes 98 No 07057 No 16 Yes 14270
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS  Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS  COTTON POINT LIVING CENTER 609 SOUTH RAILROAD ST MATTHEWS  Mailing Address 609 SOUTH RAILROAMATTHEWS  COUNTRY AIRE ESTATES, LLC 49303 RENSSELAER LN HANNIBAL  Mailing Address 49303 RENSSELAER HANNIBAL  COUNTRY AIRE RETIREMENT CEI 18540 STATE HIGHWAY 16	DRIVE MO 63367-4123  MO 63867-9751  AD ST MO 63867-9751  MO 63401-7356  LN MO 63401-7356  NTER	Level of Care: SNF County SAINT CHARLES Region 5 Medicare  Telephone (573) 471-7861 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid  Telephone (573) 221-5400 Level of Care: RCF* County RALLS Region 5	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 30318 Yes 98 No 07057 No 16 Yes 14270
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS  Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS  COTTON POINT LIVING CENTER 609 SOUTH RAILROAD ST MATTHEWS Mailing Address 609 SOUTH RAILROAMATTHEWS  COUNTRY AIRE ESTATES, LLC 49303 RENSSELAER LN HANNIBAL Mailing Address 49303 RENSSELAER HANNIBAL  COUNTRY AIRE RETIREMENT CEI 18540 STATE HIGHWAY 16 LEWISTOWN	DRIVE MO 63367-4123  MO 63867-9751  AD ST MO 63867-9751  MO 63401-7356  LN MO 63401-7356  NTER  MO 63452-2111	Level of Care: SNF County SAINT CHARLES Region 5 Medicare  Telephone (573) 471-7861 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid  Telephone (573) 221-5400 Level of Care: RCF* County RALLS Region 5	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 30318 Yes 98 No 07057 No 16 Yes 14270
2885 TECHNOLOGY DRIVE LAKE SAINT LOUIS  Mailing Address 2885 TECHNOLOGY LAKE SAINT LOUIS  COTTON POINT LIVING CENTER 609 SOUTH RAILROAD ST MATTHEWS  Mailing Address 609 SOUTH RAILROAMATTHEWS  COUNTRY AIRE ESTATES, LLC 49303 RENSSELAER LN HANNIBAL  Mailing Address 49303 RENSSELAER HANNIBAL  COUNTRY AIRE RETIREMENT CEI 18540 STATE HIGHWAY 16	DRIVE MO 63367-4123  MO 63867-9751  AD ST MO 63867-9751  MO 63401-7356  LN MO 63401-7356  NTER  MO 63452-2111	Level of Care: SNF County SAINT CHARLES Region 5 Medicare  Telephone (573) 471-7861 Level of Care: SNF County NEW MADRID Region 2 Medicare/Medicaid  Telephone (573) 221-5400 Level of Care: RCF* County RALLS Region 5	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	60 No 30318 Yes 98 No 07057 No 16 Yes 14270

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COUNTRY AIRE RETIREMENT CENTER			
18540 STATE HIGHWAY 16	<b>Telephone</b> (573) 215-2216	Alzheimer's Unit	No
LEWISTOWN MO 63452-2111	Level of Care: SNF	Bed Capacity	60
Mailing Address 18540 STATE HIGHWAY 16	<b>County</b> LEWIS	DMH Licensed	No
LEWISTOWN MO 63452-2111	Region 5 Medicare/Medicaid	Facility Number	16896
COUNTRY CLUB REHAB AND HEALTHCARE CENTER			
503 REGENT DR	<b>Telephone</b> (660) 429-4444	Alzheimer's Unit	No
WARRENSBURG MO 64093-3231	Level of Care: RCF*	Bed Capacity	40
Mailing Address 503 REGENT DR	County JOHNSON	DMH Licensed	No
WARRENSBURG MO 64093-3231	Region 3	Facility Number	20892
W/MALMODONG 1910 04073 3231	Region 5	Pacinty Number	20092
COUNTRY CLUB REHAB AND HEALTHCARE CENTER			
503 REGENT DR	<b>Telephone</b> (660) 429-4444	Alzheimer's Unit	No
WARRENSBURG MO 64093-3231	Level of Care: SNF	Bed Capacity	73
Mailing Address 503 REGENT DR	County JOHNSON	DMH Licensed	No
WARRENSBURG MO 64093-3231	Region 3 Medicare/Medicaid	Facility Number	20892
COUNTRY LIVING ASSISTED LIVING			
2820 NORTH MAIN ST	<b>Telephone</b> (417) 926-1955	Alzheimer's Unit	No
MOUNTAIN GROVE MO 65711-1403	Level of Care: ALF	<b>Bed Capacity</b>	40
Mailing Address 2820 NORTH MAIN ST	<b>County</b> WRIGHT	DMH Licensed	No
MOUNTAIN GROVE MO 65711-1403	Region 1	<b>Facility Number</b>	27548
COUNTRY MEADOWS			
1301 N ST JOE DR	<b>Telephone</b> (573) 431-2889	Alzheimer's Unit	No
PARK HILLS MO 63601-1965	Level of Care: ALF	Bed Capacity	15
Mailing Address 1301 N ST JOE DR	County SAINT FRANCOIS	DMH Licensed	No
PARK HILLS MO 63601-1965	Region 2	Facility Number	14443
PARK HILLS MO 03001-1903	Region 2	Facility Number	14443
~~~~~			
COUNTRY MEADOWS	Tolonb (572) 421 2002	Alaboim!- TI '	N.T.
1301 N ST JOE DR	<b>Telephone</b> (573) 431-2889	Alzheimer's Unit	No
PARK HILLS MO 63601-1965	Level of Care: SNF	Bed Capacity	72
Mailing Address 1301 N ST JOE DR	County SAINT FRANCOIS	DMH Licensed	No
PARK HILLS MO 63601-1965	Region 2 Medicare/Medicaid	Facility Number	14443
COUNTRY OAK VILLAGE			
101 CROSS CREEK DR	<b>Telephone</b> (816) 224-2700	Alzheimer's Unit	No
GRAIN VALLEY MO 64029-9561	Level of Care: RCF	<b>Bed Capacity</b>	32
Mailing Address 101 CROSS CREEK DR	County JACKSON	DMH Licensed	No
GRAIN VALLEY MO 64029-9561	Region 3	Facility Number	24279
COUNTRY PLACE			
28601 US HIGHWAY 61	<b>Telephone</b> (573) 264-1555	Alzheimer's Unit	No
SCOTT CITY MO 63780-9143	Level of Care: ALF	<b>Bed Capacity</b>	24
Mailing Address 28601 US HWY 61	County SCOTT	DMH Licensed	No
SCOTT CITY MO 63780-9143	Region 2	<b>Facility Number</b>	25934

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COUNTRY VALLEY HOME				
15750 COUNTY RD 2430		<b>Telephone</b> (573) 265-8250	Alzheimer's Unit	No
SAINT JAMES	MO 65559-8211	Level of Care: RCF*	Bed Capacity	23
Mailing Address 15750 COUNTY RI		County PHELPS	DMH Licensed	Yes
SAINT JAMES	MO 65559-8211	Region 6	Facility Number	01852
COUNTRY VIEW NURSING FACI	LITY, INC			
2106 WEST MAIN ST	222 2, 21 (0	<b>Telephone</b> (573) 324-2216	Alzheimer's Unit	No
BOWLING GREEN	MO 63334-1049	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 330	1120 00001 1019	County PIKE	DMH Licensed	No
BOWLING GREEN	MO 63334-0330	Region 5 Medicare/Medicaid	Facility Number	14926
COUNTRYSIDE CARE CENTER, I	H.C			
385 SOUTH EISENHOWER		<b>Telephone</b> (417) 235-4040	Alzheimer's Unit	No
MONETT	MO 65708-8266	Level of Care: RCF*	Bed Capacity	33
Mailing Address PO BOX 434	1120 02700 0200	County BARRY	DMH Licensed	Yes
MONETT	MO 65708-0434	Region 1	Facility Number	12737
			·	
COUNTRYSIDE ESTATES				
500 NORTH OHIO		<b>Telephone</b> (660) 476-2128	Alzheimer's Unit	No
APPLETON CITY	MO 64724-1625	Level of Care: RCF*	Bed Capacity	24
Mailing Address PO BOX 98		County SAINT CLAIR	DMH Licensed	No
APPLETON CITY	MO 64724-0098	Region 1	Facility Number	15005
COUNTRYSIDE HOME, LLC				
24499 PARK DR		<b>Telephone</b> (417) 532-7418	Alzheimer's Unit	No
LEBANON	MO 65536-5843	Level of Care: RCF	Bed Capacity	20
Mailing Address 24499 PARK DR		County LACLEDE	DMH Licensed	Yes
LEBANON	MO 65536-5843	Region 1	Facility Number	15052
CD AD ADDI E VII I ACE CENIOD				
CRAB APPLE VILLAGE SENIOR 214 HARTMAN PL, SUITE 100	ESTATES	<b>Telephone</b> (636) 629-6161	Alzheimer's Unit	Yes
SAINT CLAIR	MO 63077-2458	Level of Care: ALF**	Bed Capacity	65
Mailing Address 214 HARTMAN PL		County FRANKLIN	DMH Licensed	No
SAINT CLAIR	MO 63077-2458	Region 6	Facility Number	24395
S/III/1 CL/III/	110 03077 2130	Region 0	ruemey rumoer	24373
CRANE RESIDENTIAL CARE HO	ME			
102 LILLIAN		<b>Telephone</b> (417) 723-5900	Alzheimer's Unit	No
CRANE	MO 65633-9103	Level of Care: RCF	<b>Bed Capacity</b>	36
Mailing Address 102 LILLIAN		County STONE	DMH Licensed	Yes
CRANE	MO 65633-9103	Region 1	Facility Number	01898
CRAWFORD RANCH BOARDING	HOME, LLC			
2200 VARVERA RD	•	<b>Telephone</b> (573) 756-4656	Alzheimer's Unit	No
DOE RUN	MO 63637-3121	Level of Care: RCF*	Bed Capacity	32
Mailing Address 2200 VARVERA R	D	County SAINT FRANCOIS	DMH Licensed	Yes
DOE RUN	MO 63637-3121	Region 2	Facility Number	13193

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CRESTVIEW HOME				
1313 SOUTH 25TH ST		<b>Telephone</b> (660) 425-3128	Alzheimer's Unit	No
BETHANY	MO 64424-2634	Level of Care: RCF*	Bed Capacity	24
Mailing Address PO BOX 430		County HARRISON	DMH Licensed	No
BETHANY	MO 64424-0430	Region 4	Facility Number	01936
22	3.20 0.12.0.00	Region	Tuesting Transpor	01750
CRESTVIEW HOME				
1313 SOUTH 25TH ST		<b>Telephone</b> (660) 425-3128	Alzheimer's Unit	No
BETHANY	MO 64424-2634	,		No 92
	MO 64424-2634	Level of Care: SNF	Bed Capacity	
Mailing Address PO BOX 430	MO (1404 0420	County HARRISON	DMH Licensed	No
BETHANY	MO 64424-0430	Region 4 Medicare/Medicaid	Facility Number	01936
CRECOVICOR WEATHER CARE CEN				
CRESTWOOD HEALTH CARE CEN	IEK, LLC	T-l-nh (214) 741 2525	A 1	N.T
11400 MEHL AVE	NO 62022 7204	<b>Telephone</b> (314) 741-3525	Alzheimer's Unit	No
FLORISSANT	MO 63033-7204	Level of Care: SNF	Bed Capacity	150
Mailing Address 11400 MEHL AVE		County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT	MO 63033-7204	Region 7 Medicare/Medicaid	Facility Number	14296
CREATE COLLID A COLORED I MANG	AND MEMORY CARE			
CREVE COEUR ASSISTED LIVING	AND MEMORY CARE	m		3.7
693 DECKER LN	MO (214) 7107	<b>Telephone</b> (314) 997-4532	Alzheimer's Unit	Yes
CREVE COEUR	MO 63141-7127	Level of Care: ALF**	Bed Capacity	110
Mailing Address 693 DECKER LANE	200 52444 5425	County SAINT LOUIS COUNTY	DMH Licensed	No
CREVE COEUR	MO 63141-7127	Region 7	Facility Number	29440
CREVE COEUR MANOR				
1127 TIMBER RUN DR		Tolonhone (214) 424 9261	Alzheimer's Unit	No
SAINT LOUIS	MO 63146-4482	Telephone (314) 434-8361 Level of Care: SNF		No 149
			Bed Capacity DMH Licensed	
Mailing Address 1127 TIMBER RUN D				No
SAINT LOUIS	MO 63146-4482	Region 7 Medicare/Medicaid	Facility Number	02417
CROSS CREEK AT LEE'S SUMMIT				
3320 NE WILSHIRE DR		<b>Telephone</b> (816) 607-5700	Alzheimer's Unit	Yes
LEE'S SUMMIT	MO 64064-2077	Level of Care: ALF**	Bed Capacity	55
Mailing Address 3320 NE WILSHIRE I		County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64064-2077	Region 3	Facility Number	30996
LEES SOMMIT	WO 04004-2077	Region 3	racinty Number	30990
CROWLEY RIDGE CARE CENTER				
1204 NORTH OUTER RD		<b>Telephone</b> (573) 624-5557	Alzheimer's Unit	Yes
DEXTER	MO 63841-8684	Level of Care: SNF	Bed Capacity	90
Mailing Address PO BOX 668		County STODDARD	DMH Licensed	No
DEXTER DEAT SO	MO 63841-0668	· .	Facility Number	12667
DEATER	110 03041-0000	Region 2 Medicare/Medicaid	racincy runiber	12007
CROWN REHAB AND HEALTHCAR	RE CENTER			
3001 EAST ELM		<b>Telephone</b> (816) 380-6525	Alzheimer's Unit	No
HARRISONVILLE	MO 64701-1196	Level of Care: SNF	Bed Capacity	118
Mailing Address 3001 EAST ELM		County CASS	DMH Licensed	No
		·	25 25 25	

Region 3

Medicare/Medicaid

**Facility Number** 

21031

MO 64701-1196

HARRISONVILLE

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CRYSTAL CREEK HEALTH AND I	REHABILITATION CENTER			
250 NEW FLORISSANT RD SOUTH		<b>Telephone</b> (314) 838-2211	Alzheimer's Unit	No
FLORISSANT	MO 63031-6716	Level of Care: SNF	Bed Capacity	158
Mailing Address 250 NEW FLORISSA		County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT	MO 63031-6716	Region 7 Medicare/Medicaid	Facility Number	05782
CRYSTAL OAKS				
1500 CALVARY CHURCH RD		<b>Telephone</b> (636) 933-1818	Alzheimer's Unit	Yes
FESTUS	MO 63028-4125	Level of Care: ALF**	Bed Capacity	60
Mailing Address PO BOX 680		County JEFFERSON	DMH Licensed	No
CRYSTAL CITY	MO 63019-0680	Region 2	Facility Number	99932
CRYSTAL OAKS		<b></b> (52.5) 000 1010		
1500 CALVARY CHURCH RD		<b>Telephone</b> (636) 933-1818	Alzheimer's Unit	Yes
FESTUS PO POY 600	MO 63028-4125	Level of Care: SNF	Bed Capacity	131
Mailing Address PO BOX 680	MO (2010 0000	County JEFFERSON	DMH Licensed	No
CRYSTAL CITY	MO 63019-0680	Region 2 Medicare/Medicaid	Facility Number	99932
CUBA MANOR, INC				
210 ELDON DR		<b>Telephone</b> (573) 885-4500	Alzheimer's Unit	No
CUBA	MO 65453-1642	Level of Care: SNF	<b>Bed Capacity</b>	90
Mailing Address 210 ELDON DR		County CRAWFORD	DMH Licensed	No
CUBA	MO 65453-1642	Region 6 Medicare/Medicaid	Facility Number	21149
CURRENT RIVER NURSING CENT	ER. INC			
1015 NORTH GRAND AVE	21, 1. (0	<b>Telephone</b> (573) 996-4239	Alzheimer's Unit	NO
DONIPHAN	MO 63935-1779	Level of Care: SNF	Bed Capacity	120
Mailing Address 1015 NORTH GRAN		County RIPLEY	DMH Licensed	No
DONIPHAN	MO 63935-1779	Region 2 Medicare/Medicaid	Facility Number	17125
OVERDEGG ROLLE GVILLER MURG	DIG DV AMERICA DE			
CYPRESS POINT - SKILLED NURS 801 BAILIFF DR	ING BY AMERICARE	Tolonhous (572) 624 8008	Alzheimer's Unit	No
DEXTER	MO 63841-9500	Telephone (573) 624-8908 Level of Care: SNF	Bed Capacity	No 79
Mailing Address 801 BAILIFF DR	WO 03841-9300	County STODDARD	DMH Licensed	No
DEXTER	MO 63841-9500	Region 2 Medicare/Medicaid	Facility Number	08315
DEATER	WO 03041-7300	Region 2 Medical e/Medicald	Pacinty Number	08313
DADE COUNTY NURSING HOME I	DISTRICT			
400 BROAD ST		<b>Telephone</b> (417) 637-5315	Alzheimer's Unit	No
GREENFIELD	MO 65661-1405	Level of Care: SNF	Bed Capacity	114
Mailing Address 400 BROAD ST		County DADE	DMH Licensed	No
GREENFIELD	MO 65661-1405	Region 1 Medicare/Medicaid	Facility Number	02006
DAVIESS COUNTY NURSING AND	REHABILITATION			
1337 WEST GRAND		<b>Telephone</b> (660) 663-2197	Alzheimer's Unit	Yes
GALLATIN	MO 64640-8320	Level of Care: SNF	<b>Bed Capacity</b>	97
Mailing Address 1337 WEST GRAND		County DAVIESS	DMH Licensed	No
GALLATIN	MO 64640-8320	Region 4 Medicare/Medicaid	<b>Facility Number</b>	02032

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DELHAVEN MANOR		
5460 DELMAR BLVD	•	ner's Unit No
SAINT LOUIS MO 63112	•	
Mailing Address 5460 DELMAR BLVD	County SAINT LOUIS CITY DMH L	
SAINT LOUIS MO 63112	-3104 Region 7 Medicare/Medicaid Facility	<b>Number</b> 02089
DELMAR GARDENS NORTH		
4401 PARKER ROAD	•	ner's Unit Yes
BLACK JACK MO 63033		
Mailing Address 4401 PARKER ROAD	County SAINT LOUIS COUNTY DMH L	
BLACK JACK MO 63033	-4266 Region 7 Medicare/Medicaid Facility	<b>Number</b> 14093
DELMAR GARDENS OF CHESTERFIELD		
14855 NORTH OUTER 40 RD	<b>Telephone</b> (636) 532-0150 <b>Alzhein</b>	ner's Unit Yes
CHESTERFIELD MO 63017		
Mailing Address 14855 NORTH OUTER 40 RD	County SAINT LOUIS COUNTY DMH L	
CHESTERFIELD MO 63017	•	Number 02111
CHESTERIELD MO 03017	Region / Medicare/Medicard Pacinity	02111
DELMAR GARDENS OF CREVE COEUR		
850 COUNTRY MANOR LN	<b>Telephone</b> (314) 434-5900 <b>Alzhein</b>	ner's Unit No
CREVE COEUR MO 63141	-6651 Level of Care: SNF Bed Ca	pacity 148
Mailing Address 850 COUNTRY MANOR LN	County SAINT LOUIS COUNTY DMH L	icensed No
CREVE COEUR MO 63141	-6651 Region 7 Medicare/Medicaid Facility	Number 01830
DELMAR GARDENS OF MERAMEC VALLEY		
<b>DELMAR GARDENS OF MERAMEC VALLEY</b> 1 ARBOR TERRACE	<b>Telephone</b> (636) 343-0016 <b>Alzhein</b>	ner's Unit Yes
	•	
1 ARBOR TERRACE	•	pacity 190
1 ARBOR TERRACE FENTON MO 63026	Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH L	pacity 190
1 ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026	Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH L	pacity 190 .icensed No
1 ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026  DELMAR GARDENS OF O'FALLON	Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Louis-3900 Region 7 Medicare/Medicaid Facility	pacity 190 cicensed No Number 13468
1 ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026  DELMAR GARDENS OF O'FALLON 7068 SOUTH OUTER 364	Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Let Graph Region 7 Medicare/Medicaid Facility  Telephone (636) 240-6100 Alzhein	pacity 190 cicensed No 7 Number 13468 mer's Unit Yes
1 ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026  DELMAR GARDENS OF O'FALLON 7068 SOUTH OUTER 364 O'FALLON MO 63368	Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Louis County SAINT Louis County DMH Louis County Facility  Telephone (636) 240-6100 Alzhein Level of Care: SNF Bed Carcounty SNF Bed Carcounty County SAINT Louis Coun	pacity 190 cicensed No Number 13468  ner's Unit Yes pacity 240
1 ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026  DELMAR GARDENS OF O'FALLON 7068 SOUTH OUTER 364 O'FALLON MO 63368 Mailing Address 7068 SOUTH OUTER 364	Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Level of Care: SNF Bed Carcounty SAINT CHARLES DMH Level of Care: SAINT	pacity 190 dicensed No y Number 13468  mer's Unit Yes pacity 240 dicensed No
1 ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026  DELMAR GARDENS OF O'FALLON 7068 SOUTH OUTER 364 O'FALLON MO 63368	Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Level of Carcounty SAINT LOUIS COUNTY DMH Level of Carcounty SAINT CHARLES DMH Level of Carcounty SAINT	pacity 190 cicensed No Number 13468  ner's Unit Yes pacity 240
1 ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026  DELMAR GARDENS OF O'FALLON 7068 SOUTH OUTER 364 O'FALLON MO 63368 Mailing Address 7068 SOUTH OUTER 364	Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Level of Care: SNF Bed Carcounty SAINT CHARLES DMH Level of Care: SAINT	pacity 190 dicensed No y Number 13468  mer's Unit Yes pacity 240 dicensed No
1 ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026  DELMAR GARDENS OF O'FALLON 7068 SOUTH OUTER 364 O'FALLON MO 63368 Mailing Address 7068 SOUTH OUTER 364 O'FALLON MO 63368	Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Level of Care: SNF Bed Carcounty SAINT CHARLES DMH Level of Care: SNF Bed Carcounty SAINT CHARLES DMH Level of Care: SNF Bed Carcounty SAINT CHARLES DMH Level of Carcounty SAINT CHARLES DMH Level	pacity 190 dicensed No y Number 13468  mer's Unit Yes pacity 240 dicensed No
1 ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026  DELMAR GARDENS OF O'FALLON 7068 SOUTH OUTER 364 O'FALLON MO 63368 Mailing Address 7068 SOUTH OUTER 364 O'FALLON MO 63368  DELMAR GARDENS ON THE GREEN	Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Level of Care: SNF Bed Carcounty SAINT CHARLES DMH Level of Care: SNF Bed Carcounty SAINT CHARLES DMH Level of Care: SNF Bed Carcounty SAINT CHARLES DMH Level of Carcounty SAINT CHARLES DMH Level	pacity 190 dicensed No Number 13468  mer's Unit Yes pacity 240 dicensed No Number 24291  mer's Unit No
1 ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026  DELMAR GARDENS OF O'FALLON 7068 SOUTH OUTER 364 O'FALLON MO 63368 Mailing Address 7068 SOUTH OUTER 364 O'FALLON MO 63368  DELMAR GARDENS ON THE GREEN 15197 CLAYTON RD	Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH LESSON Region 7 Medicare/Medicaid Facility  Telephone (636) 240-6100 Alzhein Level of Care: SNF Bed Carcounty SAINT CHARLES DMH LESSON Region 5 Medicare/Medicaid Facility  Telephone (636) 394-7515 Alzhein	pacity 190 dicensed No Number 13468  mer's Unit Yes pacity 240 dicensed No Number 24291  mer's Unit No pacity 180
1 ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026  DELMAR GARDENS OF O'FALLON 7068 SOUTH OUTER 364 O'FALLON MO 63368 Mailing Address 7068 SOUTH OUTER 364 O'FALLON MO 63368  DELMAR GARDENS ON THE GREEN 15197 CLAYTON RD CHESTERFIELD MO 63017	Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Level of Care: SNF Bed Carcounty SAINT CHARLES DMH Level of Care: SNF Bed Carcounty SAINT CHARLES DMH Level of Care: SNF Bed Carcounty SAINT Charles Facility Saint Charles Facility Saint Carcounty SAINT Charles Facility Saint Carcounty SAINT Louis County SAINT Louis County DMH Level of Care: SNF Bed Carcounty SAINT Louis Care DMH Level of Care DMH Le	pacity 190 dicensed No Number 13468  mer's Unit Yes pacity 240 dicensed No Number 24291  mer's Unit No pacity 180
1 ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026  DELMAR GARDENS OF O'FALLON 7068 SOUTH OUTER 364 O'FALLON MO 63368 Mailing Address 7068 SOUTH OUTER 364 O'FALLON MO 63368  DELMAR GARDENS ON THE GREEN 15197 CLAYTON RD CHESTERFIELD MO 63017 Mailing Address 15197 CLAYTON RD	Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Level of Care: SNF Bed Carcounty SAINT LOUIS COUNTY DMH Level of Care: SNF Bed Carcounty SAINT CHARLES DMH Level of Care: SNF Bed Carcounty SAINT CHARLES DMH Level of Care: SNF Bed Carcounty SAINT Charles Facility Saint Charles Facility Saint Carcounty SAINT Charles Facility Saint Carcounty SAINT Louis County SAINT Louis County DMH Level of Care: SNF Bed Carcounty SAINT Louis Care DMH Level of Care DMH Le	pacity 190 dicensed No Number 13468  mer's Unit Yes pacity 240 dicensed No Number 24291  mer's Unit No pacity 180 dicensed No
1 ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026  DELMAR GARDENS OF O'FALLON 7068 SOUTH OUTER 364 O'FALLON MO 63368 Mailing Address 7068 SOUTH OUTER 364 O'FALLON MO 63368  DELMAR GARDENS ON THE GREEN 15197 CLAYTON RD CHESTERFIELD MO 63017 Mailing Address 15197 CLAYTON RD CHESTERFIELD MO 63017 CHESTERFIELD MO 63017  Mailing Address 15197 CLAYTON RD CHESTERFIELD MO 63017	Level of Care: SNF County SAINT LOUIS COUNTY DMH L Region 7 Medicare/Medicaid Facility  Telephone (636) 240-6100 Alzhein Level of Care: SNF County SAINT CHARLES DMH L Region 5 Medicare/Medicaid Facility  Telephone (636) 394-7515 Alzhein Level of Care: SNF County SAINT LOUIS COUNTY DMH L Region 7 Medicare/Medicaid Facility  Telephone (636) 394-7515 Alzhein Level of Care: SNF Bed Ca County SAINT LOUIS COUNTY DMH L Region 7 Medicare/Medicaid Facility	pacity 190 dicensed No Number 13468  mer's Unit Yes pacity 240 dicensed No Number 24291  mer's Unit No pacity 180 dicensed No Number 01515
1 ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026  DELMAR GARDENS OF O'FALLON 7068 SOUTH OUTER 364 O'FALLON MO 63368 Mailing Address 7068 SOUTH OUTER 364 O'FALLON MO 63368  DELMAR GARDENS ON THE GREEN 15197 CLAYTON RD CHESTERFIELD MO 63017 Mailing Address 15197 CLAYTON RD CHESTERFIELD MO 63017  Mailing Address 15197 CLAYTON RD CHESTERFIELD MO 63017  DELMAR GARDENS SOUTH 5300 BUTLER HILL ROAD	Level of Care: SNF County SAINT LOUIS COUNTY DMH L Region 7 Medicare/Medicaid Facility  Telephone (636) 240-6100 Alzhein Level of Care: SNF Bed Car County SAINT CHARLES DMH L Region 5 Medicare/Medicaid Facility  Telephone (636) 394-7515 Alzhein Level of Care: SNF Bed Car County SAINT LOUIS COUNTY DMH L Region 7 Medicare/Medicaid Facility  Telephone (314) 842-0588 Alzhein	pacity 190 dicensed No Number 13468  mer's Unit Yes pacity 240 dicensed No Number 24291  mer's Unit No pacity 180 dicensed No Number 01515
I ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026  DELMAR GARDENS OF O'FALLON 7068 SOUTH OUTER 364 O'FALLON MO 63368 Mailing Address 7068 SOUTH OUTER 364 O'FALLON MO 63368  DELMAR GARDENS ON THE GREEN 15197 CLAYTON RD CHESTERFIELD MO 63017 Mailing Address 15197 CLAYTON RD CHESTERFIELD MO 63017  DELMAR GARDENS SOUTH 5300 BUTLER HILL ROAD SAINT LOUIS MO 63128	Level of Care: SNF County SAINT LOUIS COUNTY DMH L Region 7 Medicare/Medicaid Facility  Telephone (636) 240-6100 Alzhein Level of Care: SNF Bed Ca County SAINT CHARLES DMH L Region 5 Medicare/Medicaid Facility  Telephone (636) 394-7515 Alzhein Level of Care: SNF Bed Ca County SAINT LOUIS COUNTY DMH L Region 7 Medicare/Medicaid Facility  Telephone (314) 842-0588 Alzhein Level of Care: SNF Bed Ca County SAINT LOUIS COUNTY DMH L Region 7 Medicare/Medicaid Facility	pacity 190 dicensed No Number 13468  mer's Unit Yes pacity 240 dicensed No Number 24291  mer's Unit No pacity 180 dicensed No Number 01515  mer's Unit Yes pacity 250
1 ARBOR TERRACE FENTON MO 63026 Mailing Address 1 ARBOR TERRACE FENTON MO 63026  DELMAR GARDENS OF O'FALLON 7068 SOUTH OUTER 364 O'FALLON MO 63368 Mailing Address 7068 SOUTH OUTER 364 O'FALLON MO 63368  DELMAR GARDENS ON THE GREEN 15197 CLAYTON RD CHESTERFIELD MO 63017 Mailing Address 15197 CLAYTON RD CHESTERFIELD MO 63017  Mailing Address 15197 CLAYTON RD CHESTERFIELD MO 63017  DELMAR GARDENS SOUTH 5300 BUTLER HILL ROAD	Level of Care: SNF County SAINT LOUIS COUNTY DMH L Region 7 Medicare/Medicaid Facility  Telephone (636) 240-6100 Alzhein Level of Care: SNF Bed Car County SAINT CHARLES DMH L Region 5 Medicare/Medicaid Facility  Telephone (636) 394-7515 Alzhein Level of Care: SNF Bed Car County SAINT LOUIS COUNTY DMH L Region 7 Medicare/Medicaid Facility  Telephone (314) 842-0588 Alzhein Level of Care: SNF Bed Car County SAINT LOUIS COUNTY DMH L Region 7 Medicare/Medicaid Facility	pacity 190 dicensed No Number 13468  mer's Unit Yes pacity 240 dicensed No Number 24291  mer's Unit No pacity 180 dicensed No Number 01515  mer's Unit Yes pacity 250

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DELMAR GARDENS WEST				
13550 SOUTH OUTER 40 RD		<b>Telephone</b> (314) 878-1330	Alzheimer's Unit	No
TOWN AND COUNTRY	MO 63017-5812	Level of Care: SNF	Bed Capacity	321
Mailing Address 13550 SOUTH OUTE	R 40 RD	County SAINT LOUIS COUNTY	DMH Licensed	No
TOWN AND COUNTRY	MO 63017-5812	Region 7 Medicare/Medicaid	Facility Number	02120
DELTA SOUTH NURSING & REHAI	BILITATION			
640 COLONEL GEORGE E DAY PARK		<b>Telephone</b> (573) 471-3400	Alzheimer's Unit	No
SIKESTON	MO 63801-0624	Level of Care: SNF	Bed Capacity	60
Mailing Address 640 COLONEL GEOF		County NEW MADRID	DMH Licensed	No
SIKESTON	MO 63801-0624	Region 2 Medicare/Medicaid	Facility Number	30584
	110 00001 0021	Region 2 Medicare/Medicard	Tuestey Tuniber	30304
DESMET RETIREMENT COMMUN	ITV			
1425 NORTH NEW FLORISSANT RD	11.1	<b>Telephone</b> (314) 838-3811	Alzheimer's Unit	No
FLORISSANT	MO 63033-2154	Level of Care: ALF**	Bed Capacity	68
Mailing Address 1425 N NEW FLORIS		County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT	MO 63033-2154		Facility Number	
PLORISSANT	MO 03033-2134	Region 7	racinty Number	20664
DEXTER LIVING CENTER				
415 S CATALPA STREET		<b>Telephone</b> (573) 624-7491	Alahaiman'a Unit	No
DEXTER	MO 63841-2017	• '	Alzheimer's Unit	73
			Bed Capacity	
Mailing Address 415 S CATALPA STR			DMH Licensed	No
DEXTER	MO 63841-2017	Region 2 Medicare/Medicaid	Facility Number	02156
DIANA'S BOARDING HOME 1, INC				
15431 STATE HIGHWAY M		<b>Telephone</b> (573) 866-2010	Alzheimer's Unit	No
MARBLE HILL	MO 63764-7487	Level of Care: RCF	Bed Capacity	20
Mailing Address 15431 STATE HIGHV		County BOLLINGER	DMH Licensed	Yes
MARBLE HILL	MO 63764-7487	Region 2	Facility Number	11123
WARDLE HILL	WO 03704-7407	Region 2	racinty Number	11123
DIANA'S BOARDING HOME 2				
HC 64, BOX 4677		<b>Telephone</b> (573) 238-3344	Alzheimer's Unit	No
MARBLE HILL	MO 63764-9408	Level of Care: RCF	Bed Capacity	40
Mailing Address HC 64, BOX 4677	1110 03704 7400	County BOLLINGER	DMH Licensed	Yes
MARBLE HILL	MO 63764-9408	Region 2	Facility Number	23940
WINDEL HEE	110 03704 7400	Region 2	racincy runner	23740
DIVERSICARE OF ST JOSEPH				
3002 N 18TH ST		<b>Telephone</b> (816) 364-4200	Alzheimer's Unit	No
SAINT JOSEPH	MO 64505-1872	Level of Care: SNF	Bed Capacity	180
Mailing Address 3002 N 18TH ST		County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64505-1872	Region 4 Medicare/Medicaid	Facility Number	08000
J. III I VODE II	01505 1072	Action in triculcal Civiculcal	a wemay rummer	00000
DIXON NURSING & REHAB				
403 EAST 10TH ST		<b>Telephone</b> (573) 759-2135	Alzheimer's Unit	No
DIXON	MO 65459-6049	Level of Care: SNF	Bed Capacity	60
Mailing Address 403 EAST 10TH ST		County PULASKI	DMH Licensed	No
DIXON	MO 65459-6049	Region 6 Medicare/Medicaid	Facility Number	15510
		6 -	•	

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DOLAN MEMORY GARE AT GALA	<b>Y</b> G		
DOLAN MEMORY CARE AT CALA	ils .	Tolonkono (214) 560 0060	Alahaiman'a Unit Yas
1225 TENNANT RD	MO (2146 5522	<b>Telephone</b> (314) 569-9060	Alzheimer's Unit Yes
SAINT LOUIS	MO 63146-5523	Level of Care: ALF**	Bed Capacity 44
Mailing Address 1225 TENNANT RD	MO 63146-5523	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 03140-3323	Region 7	Facility Number 27755
DOLAN MEMORY CARE AT CONV	VAV		
12550 CONWAY RD	VAI	<b>Telephone</b> (314) 576-3998	Alzheimer's Unit Yes
CREVE COEUR	MO 63141-8613	Level of Care: ALF**	Bed Capacity 9
Mailing Address 12550 CONWAY RD		County SAINT LOUIS COUNTY	DMH Licensed No
CREVE COEUR	MO 63141-8613	Region 7	Facility Number 22648
CREVE COLOR	WG 03111 0013	Region	racincy rainber 22040
DOLAN MEMORY CARE AT FROM	TIER		
11566 FRONTIER DR		<b>Telephone</b> (314) 995-5331	Alzheimer's Unit Yes
SAINT LOUIS	MO 63146-4873	Level of Care: ALF**	<b>Bed Capacity</b> 20
Mailing Address PO BOX 4082		County SAINT LOUIS COUNTY	DMH Licensed No
CHESTERFIELD	MO 63006-4082	Region 7	Facility Number 25162
DOLAN MEMORY CARE AT MASO	ON MANOR		
12740 MASON MANOR		<b>Telephone</b> (314) 576-6200	Alzheimer's Unit Yes
SAINT LOUIS	MO 63141-7350	Level of Care: ALF**	<b>Bed Capacity</b> 8
Mailing Address 12740 MASON MAN	IOR	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63141-7350	Region 7	Facility Number 19861
DOLAN MEMORY CARE AT SCHU	FT7		
1706 SCHUETZ RD	EIE	<b>Telephone</b> (314) 989-1762	Alzheimer's Unit Yes
SAINT LOUIS	MO 63146-4931	Level of Care: ALF**	Bed Capacity 10
Mailing Address 1706 SCHUETZ RD	110 03110 1731	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63146-4931	Region 7	Facility Number 23805
SARVI BOOK	NO 03110 1931	Region	Tuemey Number 25005
DOLAN MEMORY CARE AT WATI	ERFORD CROSSING		
11350 DOLAN WAY		<b>Telephone</b> (314) 994-1391	Alzheimer's Unit Yes
SAINT LOUIS	MO 63146-5533	Level of Care: ALF**	Bed Capacity 77
Mailing Address PO BOX 4082		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
CHESTERFIELD	MO 63006-4082	Region 7	Facility Number 31366
DOLICHEDDA EEDDA VORONGE A	IVING 8- MEMODY CARE		
DOUGHERTY FERRY ASSISTED L	IVING & MEMORY CARE	TE 1 1 (626) 925 6665	A11
2929 DOUGHERTY FERRY RD	MO 62122 2269	Telephone (636) 825-6665 Level of Care: ALF**	Alzheimer's Unit Yes
SAINT LOUIS	MO 63122-3368		Bed Capacity 110
Mailing Address 2929 DOUGHERTY		County SAINT LOUIS COUNTY	DMH Licensed No Encility Number 20024
SAINT LOUIS	MO 63122-3368	Region 7	Facility Number 30034
DUNN-DUNN HOUSE LLC			
2133 JANNETTE DR		<b>Telephone</b> (314) 869-2431	Alzheimer's Unit No
SAINT LOUIS	MO 63136-4020	Level of Care: RCF	Bed Capacity 10
Mailing Address 2133 JANNETTE DR		County SAINT LOUIS COUNTY	DMH Licensed Yes
SAINT LOUIS	MO 63136-4020	Region 7	Facility Number 14694

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DUTCHTOWN CARE CENTER			
3421 GASCONADE ST		<b>Telephone</b> (314) 832-4700	Alzheimer's Unit No
SAINT LOUIS	MO 63118-4201	Level of Care: SNF	Bed Capacity 120
Mailing Address 3421 GASCONADE S	ST	County SAINT LOUIS CITY	DMH Licensed No
SAINT LOUIS	MO 63118-4201	Region 7 Medicare/Medicaid	Facility Number 21455
E W THOMPSON HEALTH & REHA	ABILITATION CENTER		
975 MITCHELL ROAD		<b>Telephone</b> (660) 851-0668	Alzheimer's Unit Yes
SEDALIA	MO 65301-2133	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address 975 MITCHELL ROA	ΔD	County PETTIS	DMH Licensed No
SEDALIA	MO 65301-2133	Region 6 Medicare/Medicaid	Facility Number 30182
SEDIEM.	WO 03301 2133	Region o Medical e/Medicald	racinty (valider 50102
EASTVIEW MANOR CARE CENTE	R		
1622 EAST 28TH ST		<b>Telephone</b> (660) 359-2251	Alzheimer's Unit No
TRENTON	MO 64683-1104	Level of Care: SNF	Bed Capacity 90
Mailing Address 1622 EAST 28TH ST	1410 04003-1104	County GRUNDY	DMH Licensed No
o .	MO 64683-1104	•	
TRENTON	MO 04083-1104	Region 4 Medicare/Medicaid	Facility Number 18267
EDGEWOOD MANOR HEALTH CA	RE CENTER		
11900 JESSICA LN	RE CENTER	<b>Telephone</b> (816) 358-7858	Alzheimer's Unit No
RAYTOWN	MO 64138-2649	Level of Care: SNF	Bed Capacity 66
	WIO 04136-2049		
Mailing Address 11900 JESSICA LN	MO (4129 2640		
RAYTOWN	MO 64138-2649	Region 3 Medicare/Medicaid	Facility Number 14119
EL DORADO SPRINGS RESIDENTI	AL CARE		
805 NORTH JACKSON ST		<b>Telephone</b> (417) 876-4278	Alzheimer's Unit No
EL DORADO SPRINGS	MO 64744-2912	Level of Care: RCF	<b>Bed Capacity</b> 60
Mailing Address 805 NORTH JACKSO	ON ST	County CEDAR	DMH Licensed Yes
EL DORADO SPRINGS	MO 64744-2912	Region 1	Facility Number 12621
LL DOM DO SI KINOS	110 04744 2712	Kegion 1	1 deinty (valide) 12021
ELDERHAUS INN			
125 ANNA AVE, #18		<b>Telephone</b> (636) 462-6979	Alzheimer's Unit No
TROY	MO 63379-2402	Level of Care: RCF	<b>Bed Capacity</b> 20
Mailing Address 125 ANNA AVE, #18		County LINCOLN	DMH Licensed Yes
TROY	MO 63379-2402	Region 5	Facility Number 16992
ELDON NURSING & REHAB			
1001 E NORTH ST		<b>Telephone</b> (573) 392-3164	Alzheimer's Unit Yes
ELDON	MO 65026-2634	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 1001 E NORTH ST		County MILLER	<b>DMH Licensed</b> No
ELDON	MO 65026-2634	Region 6 Medicare/Medicaid	Facility Number 06139
ELIZABETH HOUSE			
12284 DE PAUL DR		<b>Telephone</b> (314) 209-8814	Alzheimer's Unit No
BRIDGETON	MO 63044-2508	Level of Care: SNF	Bed Capacity 54
Mailing Address 12284 DE PAUL DR	110 UJUTT-2300	County SAINT LOUIS COUNTY	DMH Licensed No
BRIDGETON	MO 63044 2509	·	
DAIDGETON	MO 63044-2508	Region 7	Facility Number 22316

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ELSBERRY MISSOURI HEALTH CA	ARE CENTER		
1827 HIGHWAY B		<b>Telephone</b> (573) 898-2880	Alzheimer's Unit No
ELSBERRY	MO 63343-3126	Level of Care: SNF	<b>Bed Capacity</b> 56
Mailing Address 1827 HWY B		County LINCOLN	DMH Licensed No
ELSBERRY	MO 63343-3126	Region 5 Medicare/Medicaid	Facility Number 02336
		_	
ECCEV DV DDICTOL THE			
ESSEX BY BRISTOL, THE 301 EAST 3RD		T-11 (660) 920 1759	Alekainania Vinia No
SEDALIA	MO 65301-4335	Telephone (660) 829-1758 Level of Care: RCF	Alzheimer's Unit No Bed Capacity 24
~	WIO 03301-4333		Bed Capacity 24  DMH Licensed No
Mailing Address 301 EAST 3RD SEDALIA	MO 65201 4225		
SEDALIA	MO 65301-4335	Region 6	Facility Number 23020
ESSEX OF CONCORDIA, THE			
402 REDBUD		<b>Telephone</b> (660) 463-0200	Alzheimer's Unit No
CONCORDIA	MO 64020-8358	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 402 REDBUD		County LAFAYETTE	<b>DMH Licensed</b> No
CONCORDIA	MO 64020-8358	Region 3	Facility Number 24461
ESSEX OF GRAIN VALLEY, THE			
401 SOUTHWEST ROCK CREEK LN		<b>Telephone</b> (816) 443-3992	Alzheimer's Unit No
GRAIN VALLEY	MO 64029-8460	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 401 SOUTHWEST RO	OCK CREEK LN	County JACKSON	DMH Licensed No
GRAIN VALLEY	MO 64029-8460	Region 3	Facility Number 24475
ESSEX OF LEBANON, THE			
1316 DEADRA DR		<b>Telephone</b> (417) 532-4863	Alzheimer's Unit No
LEBANON	MO 65536-4609	Level of Care: RCF	Bed Capacity 12
Mailing Address 1316 DEADRA DR	110 00000 1007	County LACLEDE	DMH Licensed No
LEBANON	MO 65536-4609	Region 1	Facility Number 24257
	110 00000 1009	Region	zaciny ramoe z4237
ESSEX OF MEXICO, THE		m	
1109 OLD FARM RD WEST		<b>Telephone</b> (573) 581-5223	Alzheimer's Unit No
MEXICO	MO 65265-3250	Level of Care: RCF	Bed Capacity 12
Mailing Address 1109 OLD FARM RD		County AUDRAIN	DMH Licensed No
MEXICO	MO 65265-3250	Region 5	Facility Number 24425
ESSEX OF OZARK, THE			
5173 NORTH 22ND		<b>Telephone</b> (417) 485-4185	Alzheimer's Unit No
OZARK	MO 65721-7637	Level of Care: RCF	Bed Capacity 12
Mailing Address 5173 NORTH 22ND		County CHRISTIAN	<b>DMH Licensed</b> No
OZARK	MO 65721-7637	Region 1	Facility Number 24318
ESTATES OF HIDDEN LAKE THE			
11728 HIDDEN LAKE DR		<b>Telephone</b> (314) 355-8833	Alzheimer's Unit No
SAINT LOUIS	MO 63138-1757	Level of Care: ALF**	<b>Bed Capacity</b> 38
Mailing Address 11728 HIDDEN LAK		County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63138-1757	Region 7	Facility Number 18442
			10112

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ESTATES OF HIDDEN LAKE THE				
11728 HIDDEN LAKE DR		<b>Telephone</b> (314) 355-8833	Alzheimer's Unit No	)
SAINT LOUIS	MO 63138-1757	Level of Care: ALF	Bed Capacity 38	3
Mailing Address 11728 HIDDEN LAKE	DR	County SAINT LOUIS COUNTY	DMH Licensed No	)
SAINT LOUIS	MO 63138-1757	Region 7	Facility Number 18442	1
ESTATES OF HIDDEN LAKE THE				
11728 HIDDEN LAKE DR		<b>Telephone</b> (314) 355-8833	Alzheimer's Unit No	)
	MO 63138-1757	Level of Care: SNF	Bed Capacity 67	
Mailing Address 11728 HIDDEN LAKE		County SAINT LOUIS COUNTY	DMH Licensed No	
_	MO 63138-1757	Region 7 Medicare/Medicaid	Facility Number 18442	
S.M.VI EGGIS	110 03130 1737	region , Medical e/Medicald	Tacinty Number 10442	
ESTATES OF PERRYVILLE, LLC, TH	IF			
430 NORTH WEST ST	112	<b>Telephone</b> (573) 547-1011	Alzheimer's Unit No	
	MO 63775-1359	Level of Care: SNF	Bed Capacity 156	
	WIO 03/73-1339			
Mailing Address 430 NORTH WEST ST PERRYVILLE	MO (2775 1250	County PERRY		
PERR I VILLE	MO 63775-1359	Region 2 Medicare/Medicaid	Facility Number 00137	
ESTATES OF SPANISH LAKE, THE				
610 PRIGGE ROAD		<b>Telephone</b> (314) 741-9393	Alzheimer's Unit No	
	MO 63138-3543			
	WIO 03138-3343		=	
Mailing Address 610 PRIGGE ROAD	MO (2120 2542	County SAINT LOUIS COUNTY	DMH Licensed No	
SAINT LOUIS	MO 63138-3543	Region 7 Medicare/Medicaid	Facility Number 15265	
ESTATES OF ST LOUIS, LLC, THE				
2115 KAPPEL DR		<b>Telephone</b> (314) 867-7474	Alzheimer's Unit No	
	MO 63136-4115	Level of Care: SNF	Bed Capacity 94	
Mailing Address 2115 KAPPEL DR	WIO 03130-4113	County SAINT LOUIS COUNTY	DMH Licensed No	
•	MO 63136-4115	•		
SAINT LOUIS	WIO 03130-4113	Region 7 Medicare/Medicaid	Facility Number 05340	,
EXCELSIOR SPRINGS NURSING & R	EHAB			
1003 MEADOWLARK LN	-	<b>Telephone</b> (816) 630-3145	Alzheimer's Unit No	)
	MO 64024-3304	Level of Care: SNF	Bed Capacity 108	
Mailing Address 1003 MEADOWLARK		County CLAY	DMH Licensed No	
•	MO 64024-3304	Region 4 Medicare/Medicaid	Facility Number 19197	
EXCELSION STREETS	110 01021 3301	Region : Medicare/Medicard	Taciney (value)	
FAIR VIEW NURSING HOME				
1714 WEST 16TH ST		<b>Telephone</b> (660) 827-1594	Alzheimer's Unit No	)
SEDALIA	MO 65301-5273	Level of Care: SNF	Bed Capacity 75	;
Mailing Address 1714 WEST 16TH ST		County PETTIS	DMH Licensed No	
-	MO 65301-5273	Region 6 Medicare/Medicaid	Facility Number 02469	
	- 10001 02.0		0240)	
FAMILY COUNSELING CENTER INC				
18408 WAYNE ROUTE D		<b>Telephone</b> (573) 222-8676	Alzheimer's Unit No	)
WAPPAPELLO	MO 63966-	Level of Care: RCF*	Bed Capacity 27	,
Mailing Address 18408 WAYNE ROUTE	E D	County WAYNE	DMH Licensed Yes	3
•	MO 63966-	Region 2	Facility Number 23584	ļ
		-		

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FAMILY PARTNERS HOME LLC			
232 CREVE COEUR AVE		<b>Telephone</b> (314) 686-4468	Alzheimer's Unit Yes
SAINT LOUIS M	IO 63011-4040	Level of Care: ALF**	<b>Bed Capacity</b> 8
Mailing Address 12882 MANCHESTER R	ED STE 201	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SAINT LOUIS M	IO 63131-1803	Region 7	Facility Number 30492
FAMILY PARTNERS MANCHESTER, I	LLC		
351 FOREST SUMMIT COURT		<b>Telephone</b> (314) 686-4468	Alzheimer's Unit Yes
	IO 63021-5509	Level of Care: ALF**	Bed Capacity 12
Mailing Address 351 FOREST SUMMIT O		County SAINT LOUIS COUNTY	DMH Licensed No
S .	IO 63021-5509	Region 7	Facility Number 32473
	10 00021 0007	region /	Tuellieg Hulliper 32473
FARMINGTON MANOR			
2879 US HIGHWAY 67		<b>Telephone</b> (573) 756-7566	Alzheimer's Unit No
	IO 63640-9168	Level of Care: RCF	<b>Bed Capacity</b> 50
Mailing Address 2879 US HWY 67		County SAINT FRANCOIS	<b>DMH Licensed</b> Yes
FARMINGTON M	IO 63640-9168	Region 2	Facility Number 15140
FARMINGTON MANOR			
2879 US HIGHWAY 67		<b>Telephone</b> (573) 756-7566	Alzheimer's Unit No
FARMINGTON M	IO 63640-9168	Level of Care: ALF	Bed Capacity 20
Mailing Address 2879 US HWY 67		County SAINT FRANCOIS	DMH Licensed Yes
S .	IO 63640-9168	Region 2	Facility Number 15140
		3	•
FARMINGTON PRESBYTERIAN MAN	OR		
500 CAYCE ST		<b>Telephone</b> (573) 756-6768	Alzheimer's Unit No
	IO 63640-2910	Level of Care: ALF	Bed Capacity 60
Mailing Address 500 CAYCE ST		County SAINT FRANCOIS	DMH Licensed No
FARMINGTON M	IO 63640-2910	Region 2	Facility Number 06181
FARMINGTON PRESBYTERIAN MAN	OR		
500 CAYCE ST		<b>Telephone</b> (573) 756-6768	Alzheimer's Unit No
FARMINGTON M	IO 63640-2910	Level of Care: RCF	Bed Capacity 60
Mailing Address 500 CAYCE ST		County SAINT FRANCOIS	DMH Licensed No
FARMINGTON M	IO 63640-2910	Region 2	Facility Number 06181
FARMINGTON PRESBYTERIAN MAN	OP		
500 CAYCE ST	OK	<b>Telephone</b> (573) 756-6768	Alzheimer's Unit Yes
	IO 63640-2910	Level of Care: SNF	Bed Capacity 90
	10 03040-2910		DMH Licensed No
Mailing Address 500 CAYCE ST FARMINGTON M	IO 63640-2910		Facility Number 06181
I ARMINOTON IV.	1O 05040-2710	Region 2 Medicare/Medicaid	Facility Number 00181
FERNDALE, INC			
15677 COUNTY RD 2430		<b>Telephone</b> (573) 265-3344	Alzheimer's Unit No
	IO 65559-8210	Level of Care: ALF	Bed Capacity 32
Mailing Address 15677 COUNTY RD 243		County PHELPS	DMH Licensed Yes
SAINT JAMES M	IO 65559-8210	Region 6	Facility Number 02526

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FESTUS MANOR				
627 WESTWOOD DR S		<b>Telephone</b> (636) 931-9066	Alzheimer's Unit	No
FESTUS	MO 63028-2062	Level of Care: SNF	Bed Capacity	150
Mailing Address 627 WESTWOOD DE		County JEFFERSON	DMH Licensed	No
FESTUS	MO 63028-2062	Region 2 Medicare/Medicaid	Facility Number (	02546
FIELD POINTE ASSISTED LIVING	BY AMERICARE			
5002 GENE FIELD ROAD		<b>Telephone</b> (816) 688-4001	Alzheimer's Unit	YES
SAINT JOSEPH	MO 64506-2056	Level of Care: ALF**	Bed Capacity	65
Mailing Address 5002 GENE FIELD R	OAD	County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64506-2056	Region 4	Facility Number 3	32538
		-		
EHEGED MUDGING GENTED				
FIESER NURSING CENTER 404 MAIN ST		<b>Telephone</b> (636) 343-4344	Alzheimer's Unit	NT -
	MO 62026 4107	Telephone (636) 343-4344 Level of Care: SNF		No 60
FENTON  Mailing Address 404 MAIN ST	MO 63026-4107		Bed Capacity	
Mailing Address 404 MAIN ST	MO 63026-4107	County SAINT LOUIS COUNTY	DMH Licensed	No
FENTON	MO 63026-4107	Region 7 Medicaid	Facility Number (	02569
FLORISSANT VALLEY HEALTH &	REHABILITATION CENTER			
1200 GRAHAM RD		<b>Telephone</b> (314) 838-6555	Alzheimer's Unit	No
FLORISSANT	MO 63031-8015	Level of Care: SNF	Bed Capacity	98
Mailing Address 1200 GRAHAM RD		County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT	MO 63031-8015	Region 7 Medicare/Medicaid	Facility Number (	00154
FORSYTH CARE CENTER				
477 COY BLVD		<b>Telephone</b> (417) 546-6337	Alzheimer's Unit	No
FORSYTH	MO 65653-5132	Level of Care: SNF	Bed Capacity	120
Mailing Address PO BOX 640		County TANEY	DMH Licensed	No
FORSYTH	MO 65653-0640	Region 1 Medicare/Medicaid	Facility Number	18870
		-		
FOUNTAINBLEAU LODGE				
2001 NORTH KINGSHIGHWAY		<b>Telephone</b> (573) 335-1999	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63701-2193	Level of Care: ALF	Bed Capacity	56
Mailing Address 2001 NORTH KINGS		County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63701-2193			12751
CAI E GIRARDEAU	MO 03701-2193	Region 2	racinty Number	12/31
FOUNTAINBLEAU LODGE				
2001 NORTH KINGSHIGHWAY		<b>Telephone</b> (573) 335-1999	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63701-2193	Level of Care: SNF	Bed Capacity	33
Mailing Address 2001 NORTH KINGS	HIGHWAY	County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63701-2193	Region 2 Medicare/Medicaid	Facility Number	12751
FOUNTAINBLEAU NURSING CENT	TER			
1349 HIGHWAY 61		<b>Telephone</b> (636) 937-3500	Alzheimer's Unit	No
FESTUS	MO 63028-4107	Level of Care: SNF	Bed Capacity	106
Mailing Address PO BOX 700		<b>County</b> JEFFERSON	DMH Licensed	No

Region 2

Medicare/Medicaid

**Facility Number** 

17080

MO 63028-0700

**FESTUS** 

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FOUNTAINS OF WEST COUNTY A	L, LLC THE			
15822 CLAYTON RD		<b>Telephone</b> (636) 220-1660	Alzheimer's Unit	Yes
ELLISVILLE	MO 63011-2240	Level of Care: ALF**	<b>Bed Capacity</b>	80
Mailing Address 15822 CLAYTON RI	)	County SAINT LOUIS COUNTY	DMH Licensed	No
ELLISVILLE	MO 63011-2240	Region 7	Facility Number	29435
FOUR CEACONG ACCICERD A WING	7			
FOUR SEASONS ASSISTED LIVING	<del>j</del>	m 1 1 (626) 266 4021	A	N
230 RAILROAD ST	MO 62262 1600	<b>Telephone</b> (636) 366-4231	Alzheimer's Unit	No
MOSCOW MILLS	MO 63362-1600	Level of Care: ALF County LINCOLN	Bed Capacity	30
Mailing Address 230 RAILROAD ST	MO (22/2 1/00	0.04441	DMH Licensed	Yes
MOSCOW MILLS	MO 63362-1600	Region 5	Facility Number	02624
FOUR SEASONS LIVING CENTER				
2800 HIGHWAY TT		<b>Telephone</b> (660) 826-8803	Alzheimer's Unit	Yes
SEDALIA	MO 65301-1410	Level of Care: SNF	Bed Capacity	239
Mailing Address 2800 HIGHWAY TT		County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-1410	Region 6 Medicare/Medicaid	Facility Number	00836
FOUR SEASONS RCF I				
220 RAILROAD ST		<b>Telephone</b> (636) 366-4231	Alzheimer's Unit	No
MOSCOW MILLS	MO 63362-1600	Level of Care: RCF	Bed Capacity	23
Mailing Address 230 RAILROAD ST	113 00002 1000	County LINCOLN	DMH Licensed	Yes
MOSCOW MILLS	MO 63362-1600	Region 5	Facility Number	02624
		11091011		0202.
FOXBERRY TERRACE - ASSISTED	LIVING BY AMERICARE			
4316 NORTH ST LOUIS AVE		<b>Telephone</b> (417) 625-1000	Alzheimer's Unit	No
WEBB CITY	MO 64870-9550	Level of Care: ALF**	Bed Capacity	46
Mailing Address 4316 NORTH ST LO		County JASPER	DMH Licensed	No
WEBB CITY	MO 64870-9550	Region 1	Facility Number	25428
FOXWOOD SPRINGS LIVING CEN	TER			
1500 WEST FOXWOOD DR		<b>Telephone</b> (816) 331-3111	Alzheimer's Unit	No
RAYMORE	MO 64083-9347	Level of Care: ALF**	<b>Bed Capacity</b>	62
Mailing Address 1500 WEST FOXWO	OOD DR	County CASS	DMH Licensed	No
RAYMORE	MO 64083-9347	<b>Region</b> 3	<b>Facility Number</b>	02649
FOXWOOD SPRINGS LIVING CEN	TED			
1500 WEST FOXWOOD DR	IER	<b>Telephone</b> (816) 331-3111	Alzheimer's Unit	Yes
RAYMORE	MO 64083-9347	Level of Care: SNF	Bed Capacity	108
Mailing Address 1500 WEST FOXWO		County CASS	DMH Licensed	No
RAYMORE	MO 64083-9347	Region 3 Medicare/Medicaid	Facility Number	02649
KIIWOKL	1120 01003-7317	region 5 Medicare/Medicald	racinty manusci	02043
FREDERICK STREET MANOR				
429 NORTH FREDERICK STREET		<b>Telephone</b> (573) 334-0916	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63701-4834	Level of Care: RCF*	Bed Capacity	32
Mailing Address 429 NORTH FREDE		County CAPE GIRARDEAU	DMH Licensed	Yes
CAPE GIRARDEAU	MO 63701-4834	Region 2	Facility Number	02662

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FREMONT SENIOR LIVING, THE				
1520 EAST BATES ST		<b>Telephone</b> (417) 881-0500	Alzheimer's Unit	Yes
SPRINGFIELD	MO 65804-8401	Level of Care: ALF**	Bed Capacity	72
Mailing Address 1520 EAST BATES	ST	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65804-8401	Region 1	Facility Number	28782
FRIENDSHIP VILLAGE ASSISTED	A LIVING & MEMODY CADE			
12777 POINTE DR	LIVING & MEMORI CARE	<b>Telephone</b> (314) 270-7111	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63127-1757	Level of Care: ALF**	Bed Capacity	84
Mailing Address 12777 POINTE DR	WIO 03127-1737	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63127-1757	Region 7	Facility Number	02703
SAINT LOUIS	WO 03127-1737	Region /	racinty Number	02703
FRIENDSHIP VILLAGE ASSISTED	LIVING & MEMORY CARE			
15250 VILLAGE VIEW DRIVE		<b>Telephone</b> (636) 733-0199	Alzheimer's Unit	YES
CHESTERFIELD	MO 63017-	Level of Care: ALF**	Bed Capacity	66
Mailing Address 15250 VILLAGE VII		County SAINT LOUIS COUNTY	DMH Licensed	Yes
CHESTERFIELD	MO 63017-	Region 7	Facility Number	02715
FRIENDSHIP VILLAGE CHESTER	RFIELD			
15250 VILLAGE VIEW DRIVE		<b>Telephone</b> (636) 733-0199	Alzheimer's Unit	No
CHESTERFIELD	MO 63017-	Level of Care: SNF	<b>Bed Capacity</b>	90
Mailing Address 15250 VILLAGE VII	EW DRIVE	County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-	Region 7 Medicare/Medicaid	Facility Number	02715
FRIENDSHIP VILLAGE SUNSET H	HILLS			
12651 VILLAGE CIRCLE DR		<b>Telephone</b> (314) 270-7777	Alzheimer's Unit	No
SAINT LOUIS	MO 63127-1778	Level of Care: SNF	Bed Capacity	144
Mailing Address 12651 VILLAGE CII	RCLE DR	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63127-1778	Region 7 Medicare/Medicaid	Facility Number	02703
			·	
EDONGLED HEAT THE OPENADIL	ET A THOM			
FRONTIER HEALTH & REHABIL	HAHON	Tolonhous (626) 046 6100	Alzheimer's Unit	No
2840 WEST CLAY ST	MO 62201 2526	Telephone (636) 946-6100 Level of Care: SNF	Bed Capacity	No 180
SAINT CHARLES  Moiling Address 2840 WEST CLAY S	MO 63301-2536		DMH Licensed	No
Mailing Address 2840 WEST CLAY S SAINT CHARLES	MO 63301-2536	·	Facility Number	01521
SAINT CHARLES	WO 03301-2330	Region 5 Medicare/Medicaid	racinty Number	01321
FULTON MANOR CARE CENTER				
520 MANOR DR		<b>Telephone</b> (573) 642-6834	Alzheimer's Unit	No
FULTON	MO 65251-2429	Level of Care: SNF	Bed Capacity	52
Mailing Address 520 MANOR DR		<b>County</b> CALLAWAY	DMH Licensed	No
FULTON	MO 65251-2429	Region 6 Medicare/Medicaid	Facility Number	02725
FULTON NURSING & REHAB				
1510 BLUFF ST		<b>Telephone</b> (573) 642-0202	Alzheimer's Unit	Yes
FULTON	MO 65251-2345	Level of Care: SNF	<b>Bed Capacity</b>	100
Mailing Address 1510 BLUFF ST		<b>County</b> CALLAWAY	DMH Licensed	No
FULTON	MO 65251-2345	Region 6 Medicare/Medicaid	Facility Number	03492

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GABLES AT BRADY CIRCLE, LLC	THE			
11 BRADY CIRCLE		<b>Telephone</b> (314) 890-2230	Alzheimer's Unit	No
SAINT LOUIS	MO 63114-1110	Level of Care: ALF**	Bed Capacity	32
Mailing Address 11 BRADY CIRCLE		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63114-1110	Region 7	Facility Number	30048
GAINESVILLE HEALTH CARE CE	NTED			
77 MEDICAL DR	IVIER	<b>Telephone</b> (417) 679-4921	Alzheimer's Unit	No
GAINESVILLE	MO 65655-0628	Level of Care: SNF	Bed Capacity	99
	WIO 03033-0028		DMH Licensed	No
Mailing Address PO BOX 628	MO (5(55 0(2))			
GAINESVILLE	MO 65655-0628	Region 1 Medicare/Medicaid	Facility Number	12868
GANDA POAR A ORGE				
GAMMA ROAD LODGE 250 E LOCUST		T-1 (572) (94 2002	A 1-1	NT-
	MO (2204 1422	<b>Telephone</b> (573) 684-2002	Alzheimer's Unit	No
WELLSVILLE	MO 63384-1422	Level of Care: SNF	Bed Capacity	112
Mailing Address 250 E LOCUST		County MONTGOMERY	DMH Licensed	No
WELLSVILLE	MO 63384-1422	Region 6 Medicare/Medicaid	Facility Number	02740
~				
GARDEN PLAZA OF FLORISSANT				
1101 GARDEN PLAZA DR		<b>Telephone</b> (314) 831-0988	Alzheimer's Unit	Yes
FLORISSANT	MO 63033-2269	Level of Care: ALF**	Bed Capacity	102
Mailing Address 1101 GARDEN PLAZ		County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT	MO 63033-2269	Region 7	Facility Number	27826
CADDEN VIEW CADE CENTED				
GARDEN VIEW CARE CENTER				
700 CADDEN DATH		Tolombono (626) 240 2940	Alabaimania Iluit	Vac
700 GARDEN PATH	MO 62266 2052	Telephone (636) 240-2840	Alzheimer's Unit	Yes
O'FALLON	MO 63366-3052	Level of Care: SNF	Bed Capacity	120
O'FALLON <b>Mailing Address</b> 700 GARDEN PATH		Level of Care: SNF County SAINT CHARLES	Bed Capacity DMH Licensed	120 No
O'FALLON		Level of Care: SNF	Bed Capacity	120
O'FALLON  Mailing Address 700 GARDEN PATH  O'FALLON	MO 63366-3052	Level of Care: SNF County SAINT CHARLES	Bed Capacity DMH Licensed	120 No
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT	MO 63366-3052	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	120 No 13963
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT 13612 BIG BEND RD	MO 63366-3052	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 861-0500	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	120 No 13963 Yes
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT 13612 BIG BEND RD VALLEY PARK	MO 63366-3052  **DOUGHERTY FERRY  MO 63088-1447	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 861-0500 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	120 No 13963 Yes 120
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT 13612 BIG BEND RD VALLEY PARK  Mailing Address 13612 BIG BEND RD	MO 63366-3052  **TOOUGHERTY FERRY  MO 63088-1447	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 861-0500 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 13963 Yes 120 No
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT 13612 BIG BEND RD VALLEY PARK	MO 63366-3052  **DOUGHERTY FERRY  MO 63088-1447	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 861-0500 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	120 No 13963 Yes 120
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT 13612 BIG BEND RD VALLEY PARK  Mailing Address 13612 BIG BEND RE VALLEY PARK	MO 63366-3052  T DOUGHERTY FERRY  MO 63088-1447  MO 63088-1447	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 861-0500 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 13963 Yes 120 No
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT 13612 BIG BEND RD VALLEY PARK Mailing Address 13612 BIG BEND RE VALLEY PARK  GARDEN VIEW CARE CENTER OF	MO 63366-3052  **DOUGHERTY FERRY  MO 63088-1447  MO 63088-1447  **CCHESTERFIELD	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 861-0500 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 13963 Yes 120 No 23101
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT 13612 BIG BEND RD VALLEY PARK Mailing Address 13612 BIG BEND RD VALLEY PARK  GARDEN VIEW CARE CENTER OF 1025 CHESTERFIELD POINTE PRKW	MO 63366-3052  **DOUGHERTY FERRY  MO 63088-1447  MO 63088-1447  **CHESTERFIELD  Y	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 861-0500 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 537-3333	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 13963 Yes 120 No 23101
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT 13612 BIG BEND RD VALLEY PARK  Mailing Address 13612 BIG BEND RE VALLEY PARK  GARDEN VIEW CARE CENTER OF 1025 CHESTERFIELD POINTE PRKW CHESTERFIELD	MO 63366-3052  F DOUGHERTY FERRY  MO 63088-1447  MO 63088-1447  F CHESTERFIELD  Y  MO 63017-1957	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 861-0500 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 537-3333 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	120 No 13963 Yes 120 No 23101
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT 13612 BIG BEND RD VALLEY PARK  Mailing Address 13612 BIG BEND RE VALLEY PARK  GARDEN VIEW CARE CENTER OF 1025 CHESTERFIELD POINTE PRKW CHESTERFIELD  Mailing Address 1025 CHESTERFIEL	MO 63366-3052  CDOUGHERTY FERRY  MO 63088-1447  MO 63088-1447  CCHESTERFIELD  Y  MO 63017-1957 D POINTE PRKWY	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 861-0500 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 537-3333 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 13963 Yes 120 No 23101 Yes 130 No
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT 13612 BIG BEND RD VALLEY PARK  Mailing Address 13612 BIG BEND RE VALLEY PARK  GARDEN VIEW CARE CENTER OF 1025 CHESTERFIELD POINTE PRKW CHESTERFIELD	MO 63366-3052  F DOUGHERTY FERRY  MO 63088-1447  MO 63088-1447  F CHESTERFIELD  Y  MO 63017-1957	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 861-0500 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 537-3333 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	120 No 13963 Yes 120 No 23101
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT 13612 BIG BEND RD VALLEY PARK  Mailing Address 13612 BIG BEND RD VALLEY PARK  GARDEN VIEW CARE CENTER OF 1025 CHESTERFIELD POINTE PRKW CHESTERFIELD  Mailing Address 1025 CHESTERFIEL CHESTERFIELD	MO 63366-3052  CDOUGHERTY FERRY  MO 63088-1447  MO 63088-1447  CCHESTERFIELD  Y  MO 63017-1957 D POINTE PRKWY	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 861-0500 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 537-3333 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 13963 Yes 120 No 23101 Yes 130 No
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT 13612 BIG BEND RD VALLEY PARK  Mailing Address 13612 BIG BEND RE VALLEY PARK  GARDEN VIEW CARE CENTER OF 1025 CHESTERFIELD POINTE PRKW CHESTERFIELD  Mailing Address 1025 CHESTERFIEL CHESTERFIELD  GARDEN VILLAS	MO 63366-3052  CDOUGHERTY FERRY  MO 63088-1447  MO 63088-1447  CCHESTERFIELD  Y  MO 63017-1957 D POINTE PRKWY	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 861-0500 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 537-3333 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 13963 Yes 120 No 23101 Yes 130 No 16409
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT 13612 BIG BEND RD VALLEY PARK Mailing Address 13612 BIG BEND RD VALLEY PARK  GARDEN VIEW CARE CENTER OF 1025 CHESTERFIELD POINTE PRKW CHESTERFIELD  Mailing Address 1025 CHESTERFIEL CHESTERFIELD  GARDEN VILLAS 13590 SOUTH OUTER 40 RD	MO 63366-3052  **DOUGHERTY FERRY  MO 63088-1447  MO 63088-1447  **CHESTERFIELD  Y  MO 63017-1957  D POINTE PRKWY  MO 63017-1957	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 861-0500 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 537-3333 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (314) 434-2520	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 13963 Yes 120 No 23101 Yes 130 No 16409
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT 13612 BIG BEND RD VALLEY PARK  Mailing Address 13612 BIG BEND RD VALLEY PARK  GARDEN VIEW CARE CENTER OF 1025 CHESTERFIELD POINTE PRKW CHESTERFIELD  Mailing Address 1025 CHESTERFIEL CHESTERFIELD  GARDEN VILLAS 13590 SOUTH OUTER 40 RD TOWN AND COUNTRY	MO 63366-3052  **DOUGHERTY FERRY  MO 63088-1447  MO 63088-1447  **F CHESTERFIELD  Y  MO 63017-1957  D POINTE PRKWY  MO 63017-1957  MO 63017-5823	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 861-0500 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 537-3333 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (314) 434-2520 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 13963 Yes 120 No 23101 Yes 130 No 16409
O'FALLON  Mailing Address 700 GARDEN PATH O'FALLON  GARDEN VIEW CARE CENTER AT 13612 BIG BEND RD VALLEY PARK Mailing Address 13612 BIG BEND RD VALLEY PARK  GARDEN VIEW CARE CENTER OF 1025 CHESTERFIELD POINTE PRKW CHESTERFIELD  Mailing Address 1025 CHESTERFIEL CHESTERFIELD  GARDEN VILLAS 13590 SOUTH OUTER 40 RD	MO 63366-3052  **DOUGHERTY FERRY  MO 63088-1447  MO 63088-1447  **F CHESTERFIELD  Y  MO 63017-1957  D POINTE PRKWY  MO 63017-1957  MO 63017-5823	Level of Care: SNF County SAINT CHARLES Region 5 Medicare/Medicaid  Telephone (636) 861-0500 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (636) 537-3333 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (314) 434-2520	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 13963 Yes 120 No 23101 Yes 130 No 16409

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GARDEN VILLAS NORTH				
4505 PARKER ROAD		<b>Telephone</b> (314) 355-6100	Alzheimer's Unit	No
BLACK JACK	MO 63033-4268	Level of Care: ALF**	Bed Capacity	90
Mailing Address 4505 PARKER RD		County SAINT LOUIS COUNTY	DMH Licensed	No
S .	MO 63033-4268	Region 7	Facility Number 28	8930
		Region /	20	,,,,,
GARDEN VILLAS OF O'FALLON				
7092 SOUTH OUTER 364 ROAD		<b>Telephone</b> (636) 240-5560	Alzheimer's Unit	No
O'FALLON	MO 63368-7757	Level of Care: ALF	Bed Capacity	95
Mailing Address 7092 SOUTH OUTER 3	664 RD	County SAINT CHARLES	DMH Licensed	No
O'FALLON	MO 63368-7757	Region 5	Facility Number 27	7793
GARDEN VILLAS SOUTH				
13457 TESSON FERRY RD		<b>Telephone</b> (314) 843-7788	Alzheimer's Unit	No
	MO 63128-4010	Level of Care: ALF	Bed Capacity	76
Mailing Address 13457 TESSON FERRY		County SAINT LOUIS COUNTY	DMH Licensed	No
· ·	MO 63128-4010			
SAINI LOUIS	MO 03128-4010	Region 7	Facility Number 28	8964
GARDENS AT BARRY ROAD, THE				
8300 NW BARRY ROAD		<b>Telephone</b> (816) 584-3200	Alzheimer's Unit	No
KANSAS CITY	MO 64153-1634	Level of Care: ALF	Bed Capacity	100
Mailing Address 8300 NW BARRY RD		County PLATTE	DMH Licensed	No
_	MO 64153-1634	Region 4	Facility Number 23	3774
GARDENS AT BARRY ROAD, THE		T. I		•
8300 NW BARRY RD		<b>Telephone</b> (816) 584-3200	Alzheimer's Unit	Yes
	MO 64153-1634	Level of Care: ALF**	Bed Capacity	40
Mailing Address 8300 NW BARRY RD		County PLATTE	DMH Licensed	No
KANSAS CITY	MO 64153-1634	Region 4	Facility Number 23	3774
GARDENS, THE				
1302 WEST SUNSET		<b>Telephone</b> (417) 889-7600	Alzheimer's Unit	Yes
SPRINGFIELD	MO 65807-5943	Level of Care: ALF**	Bed Capacity	148
Mailing Address 1302 WEST SUNSET		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65807-5943	Region 1	Facility Number 20	0288
GASCONADE MANOR NURSING HO	ME			
1910 NURSING HOME RD	VIII.	<b>Telephone</b> (573) 437-4101	Alzheimer's Unit	No
	MO 65066 2844			
	MO 65066-2844	Level of Care: SNF	Bed Capacity	79 N-
Mailing Address PO BOX 520	MO (5066 0520	County GASCONADE	DMH Licensed	No
OWENSVILLE	MO 65066-0520	Region 6 Medicare/Medicaid	Facility Number 02	2804
GASCONADE TERRACE RETIREME	NT CENTER			
1930 NURSING HOME RD		<b>Telephone</b> (573) 437-4833	Alzheimer's Unit	No
OWENSVILLE	MO 65066-2844	Level of Care: ALF	Bed Capacity	19
Mailing Address PO BOX 520		County GASCONADE	DMH Licensed	No
OWENSVILLE	MO 65066-0520	Region 6	Facility Number 14	4143

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GENERAL BAPTIST NURSING HOM	ME		
17108 US HIGHWAY 62		<b>Telephone</b> (573) 246-2155	Alzheimer's Unit Yes
CAMPBELL	MO 63933-6383	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 17108 US HWY 62		County DUNKLIN	<b>DMH Licensed</b> No
CAMPBELL	MO 63933-6383	Region 2 Medicare/Medicaid	Facility Number 02820
GEORGIA BROWN BLOSSER HOM	E FOR THE AGED		
1210 EAST EASTWOOD ST		<b>Telephone</b> (660) 886-5020	Alzheimer's Unit No
MARSHALL	MO 65340-1510	Level of Care: RCF	Bed Capacity 11
Mailing Address 1210 EAST EASTWO		County SALINE	DMH Licensed No
MARSHALL	MO 65340-1510	Region 5	Facility Number 00633
GEORGIAN GARDENS CENTER FO	OR REHAR AND HEALTHCARE		
1 GEORGIAN GARDENS DR		<b>Telephone</b> (573) 438-6261	Alzheimer's Unit Yes
POTOSI	MO 63664-1436	Level of Care: SNF	Bed Capacity 120
Mailing Address 1 GEORGIAN GARDI		County WASHINGTON	DMH Licensed No
POTOSI	MO 63664-1436	Region 2 Medicare/Medicaid	Facility Number 02830
101051	NIO 03004 1430	Region 2 Medical e/Medicalu	racinty (value)
GIDEON CARE CENTER			
300 LUNBECK		<b>Telephone</b> (573) 448-3505	Alzheimer's Unit No
GIDEON	MO 63848-9211	Level of Care: SNF	<b>Bed Capacity</b> 72
Mailing Address PO BOX 197		County NEW MADRID	DMH Licensed No
GIDEON	MO 63848-0197	Region 2 Medicare/Medicaid	Facility Number 15538
a			
GLASGOW GARDENS		T. 1 . 1	
100 AUDSLEY DR	1.0	<b>Telephone</b> (660) 338-2297	Alzheimer's Unit No
GLASGOW	MO 65254-9537	Level of Care: SNF	Bed Capacity 59
Mailing Address 100 AUDSLEY DR	1.0	County HOWARD	DMH Licensed No
GLASGOW	MO 65254-9537	Region 5 Medicare/Medicaid	Facility Number 01659
GLENDALE GARDENS NURSING &	: <b>REHAB</b>		
3535 EAST CHEROKEE		<b>Telephone</b> (417) 889-9955	Alzheimer's Unit No
SPRINGFIELD	MO 65809-2829	Level of Care: SNF	Bed Capacity 120
Mailing Address 3535 EAST CHEROK	EE	County GREENE	DMH Licensed No
SPRINGFIELD	MO 65809-2829	Region 1 Medicare/Medicaid	Facility Number 16735
GLENFIELD MEMORY CARE			
118 OHMES ROAD		<b>Telephone</b> (636) 447-4440	Alzheimer's Unit Yes
COTTLEVILLE	MO 63376-7649	Level of Care: ALF**	<b>Bed Capacity</b> 12
Mailing Address 118 OHMES RD		County SAINT CHARLES	<b>DMH Licensed</b> No
COTTLEVILLE	MO 63376-7649	Region 5	Facility Number 30372
GLENWOOD HEALTHCARE			
851 THOROUGHFARE		<b>Telephone</b> (417) 935-2992	Alzheimer's Unit Yes
SEYMOUR	MO 65746-8767	Level of Care: SNF	Bed Capacity 60
Mailing Address 851 THOROUGHFAR		County WEBSTER	DMH Licensed No
SEYMOUR	MO 65746-8767	Region 1 Medicare/Medicaid	Facility Number 16944
			•

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GOGGIN BOARDING HOME LLC				
620 COUNTY ROAD 40		<b>Telephone</b> (573) 697-5894	Alzheimer's Unit	No
CALEDONIA	MO 63631-9133	Level of Care: RCF	Bed Capacity	12
Mailing Address 620 COUNTY RD 40		County IRON	DMH Licensed	Yes
CALEDONIA	MO 63631-9133	Region 2	Facility Number	02937
		region -		02,57
GOLDEN AGE LIVING CENTER				
404 E THIRD ST		<b>Telephone</b> (573) 377-4521	Alzheimer's Unit	Yes
STOVER	MO 65078-0947	Level of Care: SNF	<b>Bed Capacity</b>	61
Mailing Address PO BOX 307		County MORGAN	DMH Licensed	No
STOVER	MO 65078-0307	Region 6 Medicare/Medicaid	Facility Number	02949
GOLDEN AGE NURSING HOME				
12498 SE HWY 116		<b>Telephone</b> (660) 645-2243	Alzheimer's Unit	No
BRAYMER	MO 64624-9107	Level of Care: SNF	Bed Capacity	83
Mailing Address 12498 SE HWY 116	110 010217107	County CALDWELL	DMH Licensed	No
BRAYMER	MO 64624-9107	Region 4 Medicare/Medicaid	Facility Number	02957
		region interior (interior)		02)31
GOLDEN ESTATE RESIDENTIAL O	ARE			
1134 WEST NORTON RD		<b>Telephone</b> (417) 833-4440	Alzheimer's Unit	No
SPRINGFIELD	MO 65803-1070	Level of Care: RCF*	<b>Bed Capacity</b>	31
Mailing Address 1134 WEST NORTON	N RD	County GREENE	DMH Licensed	Yes
SPRINGFIELD	MO 65803-1070	Region 1	Facility Number	02984
GOLDEN OAKS, LLC				
27882 HIGHWAY H		<b>Telephone</b> (660) 886-6172	Alzheimer's Unit	No
MARSHALL	MO 65340-5303	Level of Care: ALF**	Bed Capacity	67
Mailing Address 27882 HIGHWAY H	WO 05340-5303	County SALINE	DMH Licensed	No
MARSHALL	MO 65340-5303	Region 5	Facility Number	15380
WARSHALL	WIO 03340-3303	Kegion 5	Facility Number	13360
GOLDEN YEARS CENTER FOR RE	HAB AND HEALTHCARE			
GOLDEN YEARS CENTER FOR RE 2001 JEFFERSON PARKWAY	HAB AND HEALTHCARE	<b>Telephone</b> (816) 380-4731	Alzheimer's Unit	Yes
	HAB AND HEALTHCARE  MO 64701-3714	Telephone (816) 380-4731 Level of Care: SNF	Alzheimer's Unit Bed Capacity	Yes 132
2001 JEFFERSON PARKWAY	MO 64701-3714	• '		
2001 JEFFERSON PARKWAY HARRISONVILLE	MO 64701-3714	Level of Care: SNF	<b>Bed Capacity</b>	132
2001 JEFFERSON PARKWAY HARRISONVILLE <b>Mailing Address</b> 2001 JEFFERSON PA HARRISONVILLE	MO 64701-3714 RKWAY MO 64701-3714	Level of Care: SNF County CASS	Bed Capacity DMH Licensed	132 No
2001 JEFFERSON PARKWAY HARRISONVILLE <b>Mailing Address</b> 2001 JEFFERSON PA	MO 64701-3714 RKWAY MO 64701-3714	Level of Care: SNF County CASS Region 3 Medicare/Medicaid	Bed Capacity DMH Licensed	132 No 12458
2001 JEFFERSON PARKWAY HARRISONVILLE Mailing Address 2001 JEFFERSON PA HARRISONVILLE GOOD SAMARITAN CARE CENTER	MO 64701-3714 RKWAY MO 64701-3714	Level of Care: SNF County CASS Region 3 Medicare/Medicaid  Telephone (660) 668-4515	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	132 No
2001 JEFFERSON PARKWAY HARRISONVILLE Mailing Address 2001 JEFFERSON PA HARRISONVILLE  GOOD SAMARITAN CARE CENTER 403 WEST MAIN ST COLE CAMP	MO 64701-3714 RKWAY MO 64701-3714	Level of Care: SNF County CASS Region 3 Medicare/Medicaid  Telephone (660) 668-4515 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	132 No 12458 No 72
2001 JEFFERSON PARKWAY HARRISONVILLE Mailing Address 2001 JEFFERSON PAHARRISONVILLE  GOOD SAMARITAN CARE CENTER 403 WEST MAIN ST COLE CAMP Mailing Address 403 WEST MAIN ST	MO 64701-3714 RKWAY MO 64701-3714  R MO 65325-1144	Level of Care: SNF County CASS Region 3 Medicare/Medicaid  Telephone (660) 668-4515 Level of Care: SNF County BENTON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	132 No 12458 No 72 No
2001 JEFFERSON PARKWAY HARRISONVILLE Mailing Address 2001 JEFFERSON PA HARRISONVILLE  GOOD SAMARITAN CARE CENTER 403 WEST MAIN ST COLE CAMP	MO 64701-3714 RKWAY MO 64701-3714	Level of Care: SNF County CASS Region 3 Medicare/Medicaid  Telephone (660) 668-4515 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	132 No 12458 No 72
2001 JEFFERSON PARKWAY HARRISONVILLE Mailing Address 2001 JEFFERSON PAHARRISONVILLE  GOOD SAMARITAN CARE CENTER 403 WEST MAIN ST COLE CAMP Mailing Address 403 WEST MAIN ST COLE CAMP  GOOD SHEPHERD CARE CENTER	MO 64701-3714 RKWAY MO 64701-3714  R MO 65325-1144	Level of Care: SNF County CASS Region 3 Medicare/Medicaid  Telephone (660) 668-4515 Level of Care: SNF County BENTON Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	132 No 12458 No 72 No 03039
2001 JEFFERSON PARKWAY HARRISONVILLE Mailing Address 2001 JEFFERSON PAHARRISONVILLE  GOOD SAMARITAN CARE CENTER 403 WEST MAIN ST COLE CAMP Mailing Address 403 WEST MAIN ST COLE CAMP	MO 64701-3714 RKWAY MO 64701-3714  R MO 65325-1144	Level of Care: SNF County CASS Region 3 Medicare/Medicaid  Telephone (660) 668-4515 Level of Care: SNF County BENTON Region 6 Medicare/Medicaid  Telephone (573) 378-5411	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	132 No 12458 No 72 No
2001 JEFFERSON PARKWAY HARRISONVILLE Mailing Address 2001 JEFFERSON PAHARRISONVILLE  GOOD SAMARITAN CARE CENTER 403 WEST MAIN ST COLE CAMP Mailing Address 403 WEST MAIN ST COLE CAMP  GOOD SHEPHERD CARE CENTER 1101 WEST CLAY RD VERSAILLES	MO 64701-3714 RKWAY MO 64701-3714  R MO 65325-1144 MO 65325-1144  MO 65084-1177	Level of Care: SNF County CASS Region 3 Medicare/Medicaid  Telephone (660) 668-4515 Level of Care: SNF County BENTON Region 6 Medicare/Medicaid  Telephone (573) 378-5411 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	132 No 12458 No 72 No 03039
2001 JEFFERSON PARKWAY HARRISONVILLE Mailing Address 2001 JEFFERSON PAHARRISONVILLE  GOOD SAMARITAN CARE CENTER 403 WEST MAIN ST COLE CAMP Mailing Address 403 WEST MAIN ST COLE CAMP  GOOD SHEPHERD CARE CENTER 1101 WEST CLAY RD	MO 64701-3714 RKWAY MO 64701-3714  R MO 65325-1144 MO 65325-1144  MO 65084-1177	Level of Care: SNF County CASS Region 3 Medicare/Medicaid  Telephone (660) 668-4515 Level of Care: SNF County BENTON Region 6 Medicare/Medicaid  Telephone (573) 378-5411	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	132 No 12458 No 72 No 03039

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GOOD SHEPHERD COMMUNITY	CARE AND REHABILITATION			
200 WEST 12TH ST		<b>Telephone</b> (417) 232-4571	Alzheimer's Unit	Yes
LOCKWOOD	MO 65682-8337	Level of Care: SNF	Bed Capacity	69
Mailing Address 200 WEST 12TH ST		County DADE	DMH Licensed	No
LOCKWOOD	MO 65682-8337	Region 1 Medicare/Medicaid	Facility Number	03051
GOOD SHEPHERD RESIDENTIAL	CARE FACILITY			
200 WEST 12TH		<b>Telephone</b> (417) 232-4571	Alzheimer's Unit	No
LOCKWOOD	MO 65682-8337	Level of Care: RCF*	Bed Capacity	20
Mailing Address 200 WEST 12TH		County DADE	DMH Licensed	No
LOCKWOOD	MO 65682-8337	Region 1	Facility Number	03051
GOWER CONVALESCENT CENTE	R. INC			
323 SOUTH HIGHWAY 169	,	<b>Telephone</b> (816) 424-6483	Alzheimer's Unit	No
GOWER	MO 64454-9116	Level of Care: SNF	Bed Capacity	82
Mailing Address PO BOX 170		County CLINTON	DMH Licensed	No
GOWER	MO 64454-0170	Region 4 Medicare/Medicaid	Facility Number	03107
00 1121	110 01101 0170	region . Medicare/Medicard	Tuesday I (united)	03107
GRAN VILLAS NEOSHO				
420 LYON DR		<b>Telephone</b> (417) 451-7071	Alzheimer's Unit	No
NEOSHO	MO 64850-9194	Level of Care: RCF	<b>Bed Capacity</b>	30
Mailing Address 420 LYON DR		County NEWTON	DMH Licensed	No
NEOSHO	MO 64850-9194	Region 1	Facility Number	20156
GRANBY HOUSE				
301 SOUTH MAIN		<b>Telephone</b> (417) 472-6271	Alzheimer's Unit	No
GRANBY	MO 64844-8336	Level of Care: SNF	Bed Capacity	60
Mailing Address 301 SOUTH MAIN	110 01011 0550	County NEWTON	DMH Licensed	No
GRANBY	MO 64844-8336	Region 1 Medicare/Medicaid	Facility Number	16481
OK LID I	110 01011 0330	Region 1 Medical e/Medicald	Tacinty Number	10401
GRAND MANOR NURSING & REH	ABILITATION CENTER			
3645 COOK AVE		<b>Telephone</b> (314) 531-2352	Alzheimer's Unit	No
SAINT LOUIS	MO 63113-3801	Level of Care: SNF	Bed Capacity	120
Mailing Address 3645 COOK AVE		County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63113-3801	Region 7 Medicare/Medicaid	Facility Number	13324
CDAND DIVED HEAT TH CARE				
GRAND RIVER HEALTH CARE 118 TRENTON RD		Tolonhono (660) 646 0252	Alzheimen's Unit	No
CHILLICOTHE	MO 64601-4002	Telephone (660) 646-0353 Level of Care: SNF	Alzheimer's Unit	No 60
	WIO 04001-4002		Bed Capacity	
Mailing Address 118 TRENTON RD	MO 64601 4002	County LIVINGSTON  Pagion 4 Madicare/Medicaid	DMH Licensed	No
CHILLICOTHE	MO 64601-4002	Region 4 Medicare/Medicaid	Facility Number	16939
GRAND ROYALE, THE				
2900 NE KENDALLWOOD PKWY		<b>Telephone</b> (816) 280-4280	Alzheimer's Unit	NO
GLADSTONE	MO 64119-1831	Level of Care: ALF**	<b>Bed Capacity</b>	43
Mailing Address 2900 NE KENDALLY	WOOD PKWY	County CLAY	DMH Licensed	No
GLADSTONE	MO 64119-1831	Region 4	Facility Number	03086

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GRAND ROYALE, THE				
2900 NE KENDALLWOOD PKWY		<b>Telephone</b> (816) 280-4280	Alzheimer's Unit	No
GLADSTONE	MO 64119-1831	Level of Care: SNF	Bed Capacity	28
Mailing Address 2900 NE KENDALL	WOOD PKWY	County CLAY	DMH Licensed	No
GLADSTONE	MO 64119-1831	Region 4 Medicare	Facility Number 03	8086
GRANDVIEW HEALTHCARE CEN	TER			
201 GRAND AVE	ILK	<b>Telephone</b> (636) 239-9190	Alzheimer's Unit	No
WASHINGTON	MO 63090-1209	Level of Care: SNF		102
Mailing Address 201 GRAND AVE	110 050,0 120,	County FRANKLIN	DMH Licensed	No
WASHINGTON	MO 63090-1209	Region 6 Medicare/Medicaid		5045
		region 5 Prediction (Friedland	1 401110 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	70 13
GRANITE HOUSE RCF LLC				
321 SOUTH MAIN ST		<b>Telephone</b> (573) 546-7283	Alzheimer's Unit	No
IRONTON	MO 63650-1406	Level of Care: RCF	Bed Capacity	60
Mailing Address PO BOX 6		County IRON		Yes
IRONTON	MO 63650-0066	Region 2	Facility Number 04	1628
GREATER HEIGHTS RCF, LLC				
600 NORTH FRONT ST		<b>Telephone</b> (573) 431-0344	Alzheimer's Unit	No
PARK HILLS	MO 63601-3804	Level of Care: RCF	<b>Bed Capacity</b>	40
Mailing Address PO BOX 603		County SAINT FRANCOIS	DMH Licensed	Yes
PARK HILLS	MO 63601-0603	Region 2	Facility Number 07	181
GREEN ACRES RESIDENTIAL CA	DE FACILITY LLC			
3688 SAND CREEK ROAD	RE FACILITY, LLC	<b>Telephone</b> (573) 756-2917	Alzheimer's Unit	No
FARMINGTON	MO 63640-7350	Level of Care: RCF	Bed Capacity	12
Mailing Address 3688 SAND CREEK		County SAINT FRANCOIS		Yes
FARMINGTON	MO 63640-7350	Region 2		289
		region -	1,	20)
GREEN PARK SENIOR LIVING CO	OMMUNITY			
9350 GREEN PARK ROAD		<b>Telephone</b> (314) 845-0900		Yes
SAINT LOUIS	MO 63123-7211	Level of Care: SNF		188
Mailing Address 9350 GREEN PARK		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63123-7211	Region 7 Medicare/Medicaid	Facility Number 17	565
GREENVILLE HEALTH CARE CE	NTER			
117 SYCAMORE ST		<b>Telephone</b> (573) 224-3298	Alzheimer's Unit	No
GREENVILLE	MO 63944-0000	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 108		County WAYNE	DMH Licensed	No
GREENVILLE	MO 63944-0108	Region 2 Medicare/Medicaid	Facility Number 15	5550
CDECODY DIDGE HEAT TH CARE	CENTED			
GREGORY RIDGE HEALTH CARE 7001 CLEVELAND AVE	CENTER	<b>Telephone</b> (816) 333-0700	Alzheimer's Unit	No
KANSAS CITY	MO 64132-1622	Level of Care: SNF		116
Mailing Address 7001 CLEVELAND		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64132-1622	Region 3 Medicare/Medicaid		109
IN IN IOTHO CIT I	1.10 UT132 1U22	Region 5 Medical e/Medicald	1 demity 1 dimber 04	107

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HAMPTON HOUSE OF MALDEN, I	NC		
201 NORTH DECATUR		<b>Telephone</b> (573) 276-6054	Alzheimer's Unit No
MALDEN	MO 63863-2017	Level of Care: RCF*	<b>Bed Capacity</b> 22
Mailing Address 201 N DECATUR		County DUNKLIN	<b>DMH Licensed</b> Yes
MALDEN	MO 63863-2017	Region 2	Facility Number 03331
HARAMBEE HOUSE, INC			
703 NORTH EIGHTH ST		<b>Telephone</b> (573) 443-6972	Alzheimer's Unit No
COLUMBIA	MO 65201-4516	Level of Care: RCF*	Bed Capacity 15
Mailing Address 703 NORTH EIGHTH		County BOONE	DMH Licensed Yes
COLUMBIA	MO 65201-4516	Region 6	Facility Number 17197
			Tuesday Transport
HARBOR PLACE - LINN			
24 TRENSHAW TRAIL		<b>Telephone</b> (573) 897-2100	Alzheimer's Unit NO
LINN	MO 65051-2874	Level of Care: RCF	Bed Capacity 24
Mailing Address 24 TRENSHAW TRA		County OSAGE	DMH Licensed No
LINN	MO 65051-2874	Region 6	Facility Number 31116
HARMONY GARDENS - ASSISTED	LIVING BY AMERICARE		
503 BURKARTH ROAD		<b>Telephone</b> (660) 747-5411	Alzheimer's Unit No
WARRENSBURG	MO 64093-3145	Level of Care: ALF**	Bed Capacity 44
Mailing Address 503 BURKARTH RD	1	County JOHNSON	DMH Licensed No
WARRENSBURG	MO 64093-3145	Region 3	Facility Number 18615
HAROLD AND LOUISE ASSISTED	LIVING		
135 COMMUNICATION DR	LIVING	<b>Telephone</b> (573) 221-1189	Alzheimer's Unit No
HANNIBAL	MO 63401-3670	Level of Care: ALF**	Bed Capacity 98
Mailing Address 135 COMMUNICAT		County MARION	DMH Licensed Yes
HANNIBAL	MO 63401-3670	Region 5	Facility Number 29639
TI I WILL	NIC 03401 3070	region 5	Tacinty Number 29039
HARRIS HOUSE RESIDENTIAL CA	ARE FACILITY, THE		
3859 EAST 59TH TERRACE		<b>Telephone</b> (816) 599-5230	Alzheimer's Unit No
KANSAS CITY	MO 64130-4410	Level of Care: RCF	<b>Bed Capacity</b> 7
Mailing Address 3859 EAST 59TH TE		County JACKSON	<b>DMH Licensed</b> No
KANSAS CITY	MO 64130-4410	Region 3	Facility Number 16225
HARRIS RESIDENTIAL CARE CEN	TER LLC		
401 SOUTH HENRY		<b>Telephone</b> (573) 756-5376	Alzheimer's Unit No
FARMINGTON	MO 63640-1823	Level of Care: RCF*	Bed Capacity 37
Mailing Address PO BOX 675		County SAINT FRANCOIS	DMH Licensed Yes
FARMINGTON	MO 63640-0675	Region 2	Facility Number 02256
HADTI AND DECIDENTIAL CARE	CENTED		
HARTLAND RESIDENTIAL CARE	CENTEK	Tolophone (660) 997 7002	Algheimon's Unit
23435 LADDER DR	MO 65240 4662	Telephone (660) 886-7093	Alzheimer's Unit No
MARSHALL Mailing Address 23/35 LADDER DR	MO 65340-4662	Level of Care: RCF	Bed Capacity 12 DMH Licensed No
Mailing Address 23435 LADDER DR MARSHALL	MO 65340 4662	County SALINE	
MAKOHALL	MO 65340-4662	Region 5	Facility Number 15163

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HARTMANN VILLAGE - ASSISTEI	LIVING BY AMERICARE			
615 RANKIN MILL LN		<b>Telephone</b> (660) 882-9933	Alzheimer's Unit	No
BOONVILLE	MO 65233-2873	Level of Care: ALF**	<b>Bed Capacity</b>	42
Mailing Address 615 RANKIN MILL I	LN	County COOPER	DMH Licensed	No
BOONVILLE	MO 65233-2873	Region 6	Facility Number	26026
HADEON GENIOD I WING				
HARTON SENIOR LIVING		TD 1 - 1 (C2C) 277 4444	A1 1	NI-
1054 SOUTH HWY 47	MO (2202 2625	<b>Telephone</b> (636) 377-4444	Alzheimer's Unit	No
WARRENTON 1054 SOUTH HWW.	MO 63383-2625	Level of Care: RCF County WARREN	Bed Capacity	36
Mailing Address 1054 SOUTH HWY 4			DMH Licensed	No
WARRENTON	MO 63383-2625	Region 6	Facility Number	30144
HARTVILLE CARE CENTER				
649 WEST ROLLA ST		<b>Telephone</b> (417) 741-6192	Alzheimer's Unit	No
HARTVILLE	MO 65667-8221	Level of Care: SNF	Bed Capacity	60
Mailing Address 649 WEST ROLLA S	T	County WRIGHT	DMH Licensed	No
HARTVILLE	MO 65667-8221	Region 1 Medicare/Medicaid	Facility Number	17946
HARVESTER RESIDENTIAL CARE	E			
35 LILLIAN DR	_	<b>Telephone</b> (636) 939-3833	Alzheimer's Unit	No
SAINT CHARLES	MO 63304-7032	Level of Care: RCF*	Bed Capacity	38
Mailing Address 35 LILLIAN DR	110 03301 7032	County SAINT CHARLES	DMH Licensed	Yes
SAINT CHARLES	MO 63304-7032	Region 5	Facility Number	03411
SAINT CHARLES	WIO 03304-7032	Region 5	racinty Number	03411
HAVEN, THE				
614 SOUTH BY-PASS		<b>Telephone</b> (573) 888-1201	Alzheimer's Unit	No
KENNETT	MO 63857-3240	Level of Care: RCF*	Bed Capacity	64
Mailing Address 612 SOUTH BY-PAS	SS	County DUNKLIN	DMH Licensed	Yes
KENNETT	MO 63857-3240	Region 2	Facility Number	27620
HEALTHBRIDGE ST LOUIS				
1201 GARDEN PLAZA DR		<b>Telephone</b> (314) 831-3752	Alzheimer's Unit	No
FLORISSANT	MO 63033-2230	Level of Care: SNF	Bed Capacity	90
Mailing Address 1201 GARDEN PLAZ	ZA DR	County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT	MO 63033-2230	Region 7 Medicare/Medicaid	Facility Number	27146
		-5	<b>V</b>	
HEART OF THE OZARKS HEALTH	HCARE CENTER			
2004 CRESTVIEW ST		<b>Telephone</b> (417) 683-4129	Alzheimer's Unit	No
AVA	MO 65608-8903	Level of Care: SNF	Bed Capacity	120
Mailing Address PO BOX 727		County DOUGLAS	DMH Licensed	No
AVA	MO 65608-0727	Region 1 Medicare/Medicaid	Facility Number	01290
HEARTLAND CARE AND REHABI	LITATION CENTER			
2525 BOUTIN DR		<b>Telephone</b> (573) 334-5225	Alzheimer's Unit	Yes
CAPE GIRARDEAU	MO 63701-8551	Level of Care: SNF	Bed Capacity	102
Mailing Address 2525 BOUTIN DR		County CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63701-8551	Region 2 Medicare/Medicaid	Facility Number	01023
				0.1025

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HEARTLAND II RCF	
117 SOUTH 15TH ST	<b>Telephone</b> (816) 676-1506 <b>Alzheimer's Unit</b> No
SAINT JOSEPH MO 64501-2904	Level of Care: RCF* Bed Capacity 52
Mailing Address 117 S 15TH ST	County BUCHANAN DMH Licensed Yes
SAINT JOSEPH MO 64501-2904	<b>Region</b> 4 <b>Facility Number</b> 18620
HEARTLAND RESIDENTIAL CARE FACILITY, INC	
1311 FRANCIS ST	Telephone (816) 233-5779 Alzheimer's Unit No
SAINT JOSEPH MO 64501-2318	Level of Care: RCF Bed Capacity 20
Mailing Address 1311 FRANCIS ST	County BUCHANAN DMH Licensed Yes
SAINT JOSEPH MO 64501-2318	Region 4 Facility Number 02491
HEIGINGED I HEHED IN HOME	
HEISINGER LUTHERAN HOME 1002 WEST MAIN ST	Telephone (573) 636-6288 Alzheimer's Unit Yes
JEFFERSON CITY MO 65109-6901	Telephone (573) 636-6288 Alzheimer's Unit Yes Level of Care: ALF** Bed Capacity 111
Mailing Address 1002 WEST MAIN ST	County COLE DMH Licensed No
JEFFERSON CITY MO 65109-6901	•
JETTERSON CITT MIO 05109-0901	<b>Region</b> 6 <b>Facility Number</b> 03479
HEISINGER LUTHERAN HOME	
1002 WEST MAIN ST	Telephone (573) 636-6288 Alzheimer's Unit No
JEFFERSON CITY MO 65109-6901	Level of Care: SNF Bed Capacity 60
Mailing Address 1002 WEST MAIN ST	County COLE DMH Licensed No
JEFFERSON CITY MO 65109-6901	<b>Region</b> 6 <b>Medicare/Medicaid Facility Number</b> 03479
HENLEY PLACE OF NEOSHO, A SENIOR RESIDENCE	E BY AMERICARE
HENLEY PLACE OF NEOSHO, A SENIOR RESIDENCE	E BY AMERICARE  Telephone (417) 451-1000 Alzheimer's Unit No
	<b>Telephone</b> (417) 451-1000 <b>Alzheimer's Unit</b> No
1105 VILLAGE RD	Telephone (417) 451-1000 Alzheimer's Unit No
1105 VILLAGE RD NEOSHO MO 64850-9076	Telephone(417) 451-1000Alzheimer's UnitNoLevel of Care:RCFBed Capacity50
1105 VILLAGE RD NEOSHO MO 64850-9076 Mailing Address 1105 VILLAGE RD	Telephone(417) 451-1000Alzheimer's UnitNoLevel of Care:RCFBed Capacity50CountyNEWTONDMH LicensedNo
1105 VILLAGE RD NEOSHO Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076 MO 64850-9076	Telephone(417) 451-1000Alzheimer's UnitNoLevel of Care:RCFBed Capacity50CountyNEWTONDMH LicensedNo
1105 VILLAGE RD  NEOSHO  Mailing Address 1105 VILLAGE RD  NEOSHO  MO 64850-9076  MO 64850-9076	Telephone(417) 451-1000Alzheimer's UnitNoLevel of Care:RCFBed Capacity50CountyNEWTONDMH LicensedNoRegion1Facility Number20193
1105 VILLAGE RD  NEOSHO  Mailing Address 1105 VILLAGE RD  NEOSHO  MO 64850-9076  HERITAGE CARE CENTER  4401 NORTH HANLEY RD	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No
1105 VILLAGE RD NEOSHO Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076  HERITAGE CARE CENTER 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No Level of Care: SNF Bed Capacity 120
NEOSHO MO 64850-9076  Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076  HERITAGE CARE CENTER 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  Mailing Address 4401 NORTH HANLEY RD	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No Level of Care: SNF Bed Capacity 120 County SAINT LOUIS COUNTY DMH Licensed No
1105 VILLAGE RD NEOSHO Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076  HERITAGE CARE CENTER 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No Level of Care: SNF Bed Capacity 120
NEOSHO MO 64850-9076  Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076  HERITAGE CARE CENTER 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  Mailing Address 4401 NORTH HANLEY RD	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No Level of Care: SNF Bed Capacity 120 County SAINT LOUIS COUNTY DMH Licensed No
NEOSHO MO 64850-9076  Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076  HERITAGE CARE CENTER 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  Mailing Address 4401 NORTH HANLEY RD	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No Level of Care: SNF Bed Capacity 120 County SAINT LOUIS COUNTY DMH Licensed No
NEOSHO MO 64850-9076  Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076  HERITAGE CARE CENTER  4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  Mailing Address 4401 NORTH HANLEY RD  SAINT LOUIS MO 63134-2710	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No Level of Care: SNF Bed Capacity 120 County SAINT LOUIS COUNTY DMH Licensed No
NEOSHO MO 64850-9076  Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076  HERITAGE CARE CENTER 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  Mailing Address 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  HERITAGE HALL NURSING CENTER	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No Level of Care: SNF Bed Capacity 120 County SAINT LOUIS COUNTY DMH Licensed No Region 7 Medicare/Medicaid Facility Number 00411
NEOSHO MO 64850-9076  Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076  HERITAGE CARE CENTER 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  Mailing Address 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  HERITAGE HALL NURSING CENTER 750 EAST HIGHWAY 22	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No Level of Care: SNF Bed Capacity 120 County SAINT LOUIS COUNTY DMH Licensed No Region 7 Medicare/Medicaid Facility Number 00411  Telephone (573) 682-5551 Alzheimer's Unit No
NEOSHO MO 64850-9076  Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076  HERITAGE CARE CENTER  4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  Mailing Address 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  HERITAGE HALL NURSING CENTER  750 EAST HIGHWAY 22 CENTRALIA MO 65240-1146	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No Level of Care: SNF Bed Capacity 120 County SAINT LOUIS COUNTY DMH Licensed No Region 7 Medicare/Medicaid Facility Number 00411  Telephone (573) 682-5551 Alzheimer's Unit No Level of Care: SNF Bed Capacity 60
NEOSHO MO 64850-9076  Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076  HERITAGE CARE CENTER  4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  Mailing Address 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  HERITAGE HALL NURSING CENTER  750 EAST HIGHWAY 22 CENTRALIA MO 65240-1146  Mailing Address 750 EAST HIGHWAY 22	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No Level of Care: SNF Bed Capacity 120 County SAINT LOUIS COUNTY DMH Licensed No Region 7 Medicare/Medicaid Facility Number 00411  Telephone (573) 682-5551 Alzheimer's Unit No Level of Care: SNF Bed Capacity 60 County BOONE DMH Licensed No
NEOSHO MO 64850-9076  Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076  HERITAGE CARE CENTER  4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  Mailing Address 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  HERITAGE HALL NURSING CENTER  750 EAST HIGHWAY 22 CENTRALIA MO 65240-1146  Mailing Address 750 EAST HIGHWAY 22 CENTRALIA MO 65240-1146	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No Level of Care: SNF Bed Capacity 120 County SAINT LOUIS COUNTY DMH Licensed No Region 7 Medicare/Medicaid Facility Number 00411  Telephone (573) 682-5551 Alzheimer's Unit No Level of Care: SNF Bed Capacity 60 County BOONE DMH Licensed No
NEOSHO MO 64850-9076  Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076  HERITAGE CARE CENTER  4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  Mailing Address 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  HERITAGE HALL NURSING CENTER  750 EAST HIGHWAY 22 CENTRALIA MO 65240-1146  Mailing Address 750 EAST HIGHWAY 22 CENTRALIA MO 65240-1146  HERITAGE HILLS ASSISTED LIVING FACILITY	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No Level of Care: SNF Bed Capacity 120 County SAINT LOUIS COUNTY DMH Licensed No Region 7 Medicare/Medicaid Facility Number 00411  Telephone (573) 682-5551 Alzheimer's Unit No Level of Care: SNF Bed Capacity 60 County BOONE DMH Licensed No Region 6 Medicare/Medicaid Facility Number 03069
NEOSHO MO 64850-9076  Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076  HERITAGE CARE CENTER  4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  Mailing Address 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  HERITAGE HALL NURSING CENTER  750 EAST HIGHWAY 22 CENTRALIA MO 65240-1146  Mailing Address 750 EAST HIGHWAY 22 CENTRALIA MO 65240-1146  Mailing Address 750 EAST HIGHWAY 22 CENTRALIA MO 65240-1146  HERITAGE HILLS ASSISTED LIVING FACILITY ROUTE 5, BOX 68	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No Level of Care: SNF Bed Capacity 120 County SAINT LOUIS COUNTY DMH Licensed No Region 7 Medicare/Medicaid Facility Number 00411  Telephone (573) 682-5551 Alzheimer's Unit No Level of Care: SNF Bed Capacity 60 County BOONE DMH Licensed No Region 6 Medicare/Medicaid Facility Number 03069  Telephone (573) 866-2003 Alzheimer's Unit No
NEOSHO MO 64850-9076  Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076  HERITAGE CARE CENTER  4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  Mailing Address 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  HERITAGE HALL NURSING CENTER  750 EAST HIGHWAY 22 CENTRALIA MO 65240-1146  Mailing Address 750 EAST HIGHWAY 22 CENTRALIA MO 65240-1146  Mailing Address 750 EAST HIGHWAY 22 CENTRALIA MO 65240-1146  MAILING ADDRESS TO EAST HIGHWAY 22 CENTRALIA MO 65240-1146  MAILING ADDRESS TO EAST HIGHWAY 22 CENTRALIA MO 65240-1146  MO 65240-1146  MO 65240-1146  MO 65240-1146	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No Level of Care: SNF Bed Capacity 120 County SAINT LOUIS COUNTY DMH Licensed No Region 7 Medicare/Medicaid Facility Number 00411  Telephone (573) 682-5551 Alzheimer's Unit No Level of Care: SNF Bed Capacity 60 County BOONE DMH Licensed No Region 6 Medicare/Medicaid Facility Number 03069  Telephone (573) 866-2003 Alzheimer's Unit No Level of Care: ALF Bed Capacity 24
NEOSHO MO 64850-9076  Mailing Address 1105 VILLAGE RD NEOSHO MO 64850-9076  HERITAGE CARE CENTER  4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  Mailing Address 4401 NORTH HANLEY RD SAINT LOUIS MO 63134-2710  HERITAGE HALL NURSING CENTER  750 EAST HIGHWAY 22 CENTRALIA MO 65240-1146  Mailing Address 750 EAST HIGHWAY 22 CENTRALIA MO 65240-1146  Mailing Address 750 EAST HIGHWAY 22 CENTRALIA MO 65240-1146  HERITAGE HILLS ASSISTED LIVING FACILITY ROUTE 5, BOX 68	Telephone (417) 451-1000 Alzheimer's Unit No Level of Care: RCF Bed Capacity 50 County NEWTON DMH Licensed No Region 1 Facility Number 20193  Telephone (314) 521-7471 Alzheimer's Unit No Level of Care: SNF Bed Capacity 120 County SAINT LOUIS COUNTY DMH Licensed No Region 7 Medicare/Medicaid Facility Number 00411  Telephone (573) 682-5551 Alzheimer's Unit No Level of Care: SNF Bed Capacity 60 County BOONE DMH Licensed No Region 6 Medicare/Medicaid Facility Number 03069  Telephone (573) 866-2003 Alzheimer's Unit No Level of Care: ALF Bed Capacity 24

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HERITAGE NURSING CENTER - SKII	LLED NURSING BY AMERICARE		
1802 SAINT FRANCIS ST		<b>Telephone</b> (573) 888-1044	Alzheimer's Unit No
KENNETT	MO 63857-1568	Level of Care: SNF	<b>Bed Capacity</b> 72
Mailing Address PO BOX 827		County DUNKLIN	DMH Licensed No
KENNETT	MO 63857-0827	Region 2 Medicare/Medicaid	Facility Number 17533
		_	
HERITAGE VILLAGE OF GLADSTON	NE		
3000 NORTH EAST 64TH ST	\L	<b>Telephone</b> (816) 454-5130	Alzheimer's Unit No
	MO 64119-1569	Telephone (816) 454-5130 Level of Care: ALF**	
Mailing Address 3000 NE 64TH ST	WIO 04119-1309	County CLAY	Bed Capacity 60  DMH Licensed No
	MO 64119-1569	- · · · · ·	
GLADSTONE	WIO 04119-1309	Region 4	Facility Number 12510
HERITAGE VILLAGE OF PLATTE CI	ITY	T. I	A11
15 WALLINGFORD DR		<b>Telephone</b> (816) 858-2182	Alzheimer's Unit No
	MO 64079-9604	Level of Care: RCF*	Bed Capacity 30
Mailing Address 15 WALLINGFORD DR		County PLATTE	DMH Licensed No
PLATTE CITY	MO 64079-9604	Region 4	Facility Number 13182
HERMITAGE NURSING & REHAB			
18599 FIRST STREET		<b>Telephone</b> (417) 745-2111	Alzheimer's Unit Yes
	MO 65668-9129	Level of Care: SNF	Bed Capacity 120
Mailing Address PO BOX 325		County HICKORY	<b>DMH Licensed</b> No
HERMITAGE	MO 65668-0325	Region 1 Medicare/Medicaid	Facility Number 10240
HICKORY MANOR			
209 HICKORY ST		<b>Telephone</b> (573) 674-2111	Alzheimer's Unit No
LICKING	MO 65542-9847	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address 209 HICKORY ST		County TEXAS	<b>DMH Licensed</b> No
LICKING	MO 65542-9847	Region 1 Medicare/Medicaid	Facility Number 07929
HIDDEN ACRES ASSISTED LIVING			
19235 STATE ROUTE EE		<b>Telephone</b> (573) 756-8141	Alzheimer's Unit No
SAINTE GENEVIEVE	MO 63670-8213	Level of Care: ALF	<b>Bed Capacity</b> 36
Mailing Address 19235 STATE ROUTE I	EE	County SAINTE GENEVIEVE	<b>DMH Licensed</b> Yes
SAINTE GENEVIEVE	MO 63670-8213	Region 2	Facility Number 19721
HIDDEN LAKE CARE CENTER			
11400 HIDDEN LAKE DR		<b>Telephone</b> (816) 737-1010	Alzheimer's Unit No
RAYTOWN	MO 64133-7409	Level of Care: RCF*	<b>Bed Capacity</b> 48
Mailing Address 11400 HIDDEN LAKE I	DR	County JACKSON	<b>DMH Licensed</b> No
RAYTOWN	MO 64133-7409	Region 3	Facility Number 17146
HIDDEN LAKE CARE CENTER			
11400 HIDDEN LAKE DR		<b>Telephone</b> (816) 737-1010	Alzheimer's Unit No
	MO 64133-7409	Level of Care: SNF	<b>Bed Capacity</b> 112
Mailing Address 11400 HIDDEN LAKE I RAYTOWN	DR MO 64133-7409	County JACKSON  Region 3 Medicare/Medicaid	DMH Licensed No Facility Number 17146

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HIGHLAND CREST - ASSISTED LI	VING BY AMERICARE			
2204 S HALLIBURTON ST		<b>Telephone</b> (660) 627-8004	Alzheimer's Unit	No
KIRKSVILLE	MO 63501-4651	<b>Level of Care:</b> ALF**	Bed Capacity	42
Mailing Address 2204 S HALLIBURT	ON ST	County ADAIR	DMH Licensed	No
KIRKSVILLE	MO 63501-4651	Region 5	Facility Number	16785
HIGHLAND REHABILITATION & I	HEALTH CADE CENTED			
904 EAST 68TH ST	HEALTH CARE CENTER	<b>Telephone</b> (816) 333-5485	Alzheimer's Unit	NO
KANSAS CITY	MO 64131-1305	Level of Care: SNF	Bed Capacity	162
Mailing Address 904 EAST 68TH ST	WO 04131-1303	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64131-1305	Region 3 Medicare/Medicaid	Facility Number	06782
KANSAS CITT	WIO 04131-1303	Region 3 Medicare/Medicaid	Facility Number	00782
HILL CREST MANOR				
801 SOUTH COLBY		<b>Telephone</b> (816) 583-2119	Alzheimer's Unit	No
HAMILTON	MO 64644-8287	Level of Care: SNF	<b>Bed Capacity</b>	90
Mailing Address 801 SOUTH COLBY		County CALDWELL	DMH Licensed	No
HAMILTON	MO 64644-8287	Region 4 Medicare/Medicaid	Facility Number	03315
HILL CREST MANOR				
801 SOUTH COLBY		T-1 (916) 592 2110	A 1-1	No
	MO 64644 9297	Telephone (816) 583-2119 Level of Care: RCF	Alzheimer's Unit	No 24
HAMILTON	MO 64644-8287		Bed Capacity	
Mailing Address 801 SOUTH COLBY HAMILTON			DMH Licensed	No
HAMILTON	MO 64644-8287	Region 4	Facility Number	03315
HILLCREST CARE CENTER, INC				
1108 CLARKE ST		<b>Telephone</b> (636) 586-3022	Alzheimer's Unit	No
DE SOTO	MO 63020-2706	Level of Care: SNF	<b>Bed Capacity</b>	120
Mailing Address 1108 CLARKE ST		County JEFFERSON	DMH Licensed	No
DE SOTO	MO 63020-2706	Region 2 Medicare/Medicaid	<b>Facility Number</b>	20084
WILL ORDER DECIDENTIAL GARE	nya.			
HILLCREST RESIDENTIAL CARE,	, INC	TELL (572) (07, 2201	A1 1	N
9415 NORTH BROWN STATION RD	MO (5200 0571	<b>Telephone</b> (573) 696-3201	Alzheimer's Unit	No
COLUMBIA	MO 65202-8671	Level of Care: ALF	Bed Capacity	33
Mailing Address 9415 NORTH BROW		County BOONE	DMH Licensed	Yes
COLUMBIA	MO 65202-8671	Region 6	Facility Number	03572
HILLSIDE CARE CENTER				
321 NORTH SECTION		<b>Telephone</b> (573) 221-1439	Alzheimer's Unit	No
HANNIBAL	MO 63401-3460	Level of Care: RCF*	Bed Capacity	44
Mailing Address PO BOX 308		County MARION	DMH Licensed	Yes
HANNIBAL	MO 63401-0308	Region 5	Facility Number	14879
			•	
HILLSIDE LIVING CENTER				
10160 RESTORATION CIRCLE ROAD		<b>Telephone</b> (573) 562-0303	Alzheimer's Unit	No
MINERAL POINT	MO 63660-8538	Level of Care: ALF**	Bed Capacity	60
Mailing Address PO BOX 534	1.0 .0.01 0.01	County WASHINGTON	DMH Licensed	Yes
PARK HILLS	MO 63601-0534	Region 2	Facility Number	09270

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HILLSIDE REHAB AND HEALTHC	ARE CENTER		
1265 MCLARAN AVE		<b>Telephone</b> (314) 388-4121	Alzheimer's Unit Yes
SAINT LOUIS	MO 63147-1606	Level of Care: SNF	<b>Bed Capacity</b> 208
Mailing Address 1265 MCLARAN AV	E	County SAINT LOUIS CITY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63147-1606	Region 7 Medicare/Medicaid	Facility Number 04687
HILLTOP HAVEN RESIDENTIAL C	CARE FACILITY		
18941 CR 305A		<b>Telephone</b> (573) 226-5426	Alzheimer's Unit No
EMINENCE	MO 65466-9702	Level of Care: RCF	Bed Capacity 20
Mailing Address 18941 CR 305A	WIO 03400-7702	County SHANNON	DMH Licensed Yes
EMINENCE	MO 65466-9702	Region 2	
EMINENCE	MO 03400-9702	Region 2	Facility Number 03615
HOLDEN MANOR CARE CENTER			
HOLDEN MANOR CARE CENTER 2005 SOUTH LEXINGTON		<b>Telephone</b> (816) 732-4138	Alzheimer's Unit No
	MO 64040-1610	Level of Care: SNF	Bed Capacity 52
HOLDEN			- · ·
Mailing Address 2005 SOUTH LEXING		County JOHNSON	DMH Licensed No
HOLDEN	MO 64040-1610	Region 3 Medicare/Medicaid	Facility Number 08334
HOLIDAY DECIDENTIAL CADE			
HOLIDAY RESIDENTIAL CARE 1019 OLD ST MARY'S RD		TO 1 1 (572) 547 7209	AND THE STATE OF T
	MO (2775 1200	<b>Telephone</b> (573) 547-7398	Alzheimer's Unit No
PERRYVILLE	MO 63775-1298	Level of Care: RCF*	Bed Capacity 20
Mailing Address 1019 OLD ST MARY		County PERRY	DMH Licensed No
PERRYVILLE	MO 63775-1298	Region 2	Facility Number 19872
HOLLY HILLS RETIREMENT HOM	ЛF		
6421 MINNESOTA		<b>Telephone</b> (314) 351-0767	Alzheimer's Unit No
SAINT LOUIS	MO 63111-2808	Level of Care: RCF*	Bed Capacity 15
Mailing Address 6421 MINNESOTA	WIO 03111-2006	County SAINT LOUIS CITY	DMH Licensed Yes
•	MO 62111 2000	•	
SAINT LOUIS	MO 63111-2808	Region 7	Facility Number 03678
HOMESTEAD AT HICKORY VIEW	RETIREMENT COMMUNITY, THE		
1481 MARBACH DRIVE	The state of the s	<b>Telephone</b> (636) 239-1941	Alzheimer's Unit No
WASHINGTON	MO 63090-4636	Level of Care: ALF	Bed Capacity 36
Mailing Address 1481 MARBACH DR		County FRANKLIN	DMH Licensed No
WASHINGTON	MO 63090-4636	Region 6	Facility Number 32345
WASHINGTON	WO 03090-4030	Kegion 0	racinty Number 32343
HOPE CARE CENTER			
115 EAST 83RD ST		<b>Telephone</b> (816) 523-3988	Alzheimer's Unit No
KANSAS CITY	MO 64114-2537	Level of Care: SNF	Bed Capacity 16
Mailing Address 115 EAST 83RD ST		County JACKSON	DMH Licensed No
KANSAS CITY	MO 64114-2537	Region 3 Medicaid	Facility Number 21370
MINDAU CIT I	07117-2331	region 5 intenicala	racinty runnoci 213/0
HOPEDALE COTTAGE ASSISTED	LIVING THE		
1314 W SCHOOL STREET		<b>Telephone</b> (417) 581-1308	<b>Alzheimer's Unit</b> Yes
OZARK	MO 65721-6618	Level of Care: ALF**	Bed Capacity 14
Mailing Address 1314 W SCHOOL ST		County CHRISTIAN	DMH Licensed No
OZARK	MO 65721-6618	Region 1	Facility Number 30302
		o -	

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HOUSE OF CARE CENTER				
3744 BENTON BLVD		<b>Telephone</b> (816) 921-6852	Alzheimer's Unit	No
KANSAS CITY	MO 64128-2515	Level of Care: RCF	Bed Capacity	8
Mailing Address PO BOX 287912	MO 64120 7012	County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64128-7912	Region 3	Facility Number	17001
HOUSTON HOUSE				
1000 NORTH INDUSTRIAL DR		<b>Telephone</b> (417) 967-2527	Alzheimer's Unit	No
HOUSTON	MO 65483-9400	Level of Care: SNF	Bed Capacity	96
Mailing Address PO BOX 199		<b>County</b> TEXAS	DMH Licensed	No
HOUSTON	MO 65483-0199	Region 1 Medicare/Medicaid	Facility Number	10626
HUDSON HOUSE				
1700-B SOUTH HUDSON AVE		<b>Telephone</b> (417) 678-2169	Alzheimer's Unit	No
AURORA	MO 65605-2717	Level of Care: RCF*	Bed Capacity	41
Mailing Address 1700-B S HUDSON	AVE	<b>County</b> LAWRENCE	DMH Licensed	No
AURORA	MO 65605-2717	Region 1	Facility Number	10444
HUNTER ACRES CARING CENTE	AR .	m 1 1 (572) 471 7120		37
628 NORTH WEST ST SIKESTON	MO 63801-4738	Telephone (573) 471-7130 Level of Care: SNF	Alzheimer's Unit	Yes 120
Mailing Address 628 NORTH WEST			Bed Capacity DMH Licensed	No
SIKESTON	MO 63801-4738			
SIRESTON	WO 03001-4730	Region 2 Medicare/Medicaid	Facility Number	07345
IGNITE MEDICAL RESORT BLUI	E SPRINGS			
20511 E TRINITY PLACE		<b>Telephone</b> (816) 622-2900	Alzheimer's Unit	NO
BLUE SPRINGS	MO 64015-9501	Level of Care: SNF	Bed Capacity	90
Mailing Address 20511 E TRINITY F	LACE	<b>County</b> JACKSON	DMH Licensed	No
BLUE SPRINGS	MO 64015-9501	Region 3 Medicare/Medicaid	Facility Number	32246
IGNITE MEDICAL RESORT CAR	ONDELET LLC			
621 CARONDELET DR		<b>Telephone</b> (816) 941-1300	Alzheimer's Unit	No
KANSAS CITY	MO 64114-4670	Level of Care: SNF	Bed Capacity	162
Mailing Address 621 CARONDELET	`DR	<b>County</b> JACKSON	DMH Licensed	No
KANSAS CITY	MO 64114-4670	Region 3 Medicare/Medicaid	Facility Number	12185
IGNITE MEDICAL RESORT KANS	SAS CITY LLC			
2100 NW BARRY ROAD		<b>Telephone</b> (816) 521-6610	Alzheimer's Unit	No
KANSAS CITY	MO 64154-1000	Level of Care: SNF	Bed Capacity	90
Mailing Address 2100 NW BARRY F		County PLATTE	DMH Licensed	No
KANSAS CITY	MO 64154-1000	Region 4 Medicare/Medicaid	Facility Number	31464
IGNITE MEDICAL RESORT ST M	ARVSIIC			
111 MOCK AVE	MIDLL	<b>Telephone</b> (816) 228-5655	Alzheimer's Unit	Yes
BLUE SPRINGS	MO 64014-2504	Level of Care: SNF	Bed Capacity	130
Mailing Address 111 MOCK AVE		County JACKSON	DMH Licensed	No
	250 51011 2501			1.0

Region 3

Medicare/Medicaid

**Facility Number** 

13219

MO 64014-2504

BLUE SPRINGS

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IGNITE MEDICAL RESORT ST MA	RYS LLC		
111 MOCK AVE		<b>Telephone</b> (816) 228-5655	Alzheimer's Unit No
BLUE SPRINGS	MO 64014-2504	Level of Care: ALF**	<b>Bed Capacity</b> 57
Mailing Address 111 MOCK AVE		County JACKSON	<b>DMH Licensed</b> No
BLUE SPRINGS	MO 64014-2504	Region 3	Facility Number 13219
INDEPENDENCE CARE CENTER O	F PERRY COUNTY		
800 SOUTH KINGSHIGHWAY	TERRI COCIVI	<b>Telephone</b> (573) 547-6546	Alzheimer's Unit Yes
PERRYVILLE	MO 63775-2106	Level of Care: SNF	Bed Capacity 133
Mailing Address 800 SOUTH KINGSH		County PERRY	DMH Licensed No
PERRYVILLE	MO 63775-2106		
FERRI VILLE	WO 03773-2100	Region 2 Medicare/Medicaid	Facility Number 06393
NAMES OF THE PARTY			
INDEPENDENCE COURT		T-1	All-Laterant TV to
121 INDEPENDENCE DR	110 (0000 110)	<b>Telephone</b> (573) 547-1499	Alzheimer's Unit No
PERRYVILLE	MO 63775-1496	Level of Care: RCF*	Bed Capacity 75
Mailing Address 121 INDEPENDENCE		County PERRY	<b>DMH Licensed</b> No
PERRYVILLE	MO 63775-1496	Region 2	Facility Number 06393
INDEPENDENCE MANOR CARE CE	ENTER		
1600 SOUTH KINGS HIGHWAY		<b>Telephone</b> (816) 833-4777	Alzheimer's Unit Yes
INDEPENDENCE	MO 64055-1853	Level of Care: SNF	<b>Bed Capacity</b> 99
Mailing Address 1600 S KINGS HWY		County JACKSON	<b>DMH Licensed</b> No
INDEPENDENCE	MO 64055-1853	Region 3 Medicare/Medicaid	Facility Number 03807
INDEPENDENCE SQUARE RESIDE	NTIAL CARE CENTER		
1136 SOUTH MAIN ST		<b>Telephone</b> (573) 547-8600	Alzheimer's Unit No
PERRYVILLE	MO 63775-8802	Level of Care: RCF*	Bed Capacity 20
Mailing Address 1136 S MAIN ST		County PERRY	<b>DMH Licensed</b> No
PERRYVILLE	MO 63775-8802	Region 2	Facility Number 14309
J & J RESIDENTIAL CARE FACILITY	ry II		
104 WESBECHER		<b>Telephone</b> (573) 238-4602	Alzheimer's Unit No
MARBLE HILL	MO 63764-0378	Level of Care: RCF*	<b>Bed Capacity</b> 12
Mailing Address PO BOX 378		County BOLLINGER	<b>DMH Licensed</b> Yes
MARBLE HILL	MO 63764-0378	Region 2	Facility Number 07171
AL CYCON MANOR SWINGRAG			
JACKSON MANOR NURSING HOM	E	m	
710 BROADRIDGE DR		<b>Telephone</b> (573) 243-3101	Alzheimer's Unit Yes
JACKSON	MO 63755-3042	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 710 BROADRIDGE D	OR .	County CAPE GIRARDEAU	<b>DMH Licensed</b> No
JACKSON	MO 63755-3042	Region 2 Medicare/Medicaid	Facility Number 03438
IA CODG CADE CONTROL AA C			
JACOBS CARE CENTER, LLC		M 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	All Long Lating
932 WEST STATE	NO. (500) 204 (	<b>Telephone</b> (417) 865-6140	Alzheimer's Unit No
SPRINGFIELD	MO 65806-2846	Level of Care: RCF	Bed Capacity 12
Mailing Address 932 WEST STATE		County GREENE	DMH Licensed Yes
SPRINGFIELD	MO 65806-2846	Region 1	Facility Number 06229

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JAMES RIVER NURSING AND REHABILI	ITATION			
3550 EAST BATTLEFIELD		<b>Telephone</b> (417) 889-9500	Alzheimer's Unit	No
SPRINGFIELD MO	65809-3400	Level of Care: SNF	<b>Bed Capacity</b>	120
Mailing Address 3550 EAST BATTLEFIELD		County GREENE	DMH Licensed	No
SPRINGFIELD MO	65809-3400	Region 1 Medicare/Medicaid	Facility Number	17645
		5	•	
JANE HOWELL STUPP APARTMENTS				
2443 PROUHET AVE		<b>Telephone</b> (314) 890-7100	Alzheimer's Unit	No
	63114-1946	Level of Care: RCF*	Bed Capacity	30
Mailing Address 2443 PROUHET AVE	03114 1740	County SAINT LOUIS COUNTY	DMH Licensed	Yes
_	63114-1946	Region 7		
OVERLAND	03114-1940	Region /	Facility Number	18369
JEANNE JUGAN CENTER				
8745 JAMES A REED ROAD		<b>Telephone</b> (816) 761-4744	Alzheimer's Unit	No
	64138-4414	Level of Care: SNF	Bed Capacity	26
	04138-4414		DMH Licensed	
Mailing Address 8745 JAMES A REED RD	64100 4414	County JACKSON		No
KANSAS CITY MO	64138-4414	Region 3 Medicaid	Facility Number	12724
JEANNE JUGAN CENTER				
8745 JAMES A REED ROAD		<b>Telephone</b> (816) 761-4744	Alzheimer's Unit	No
	64138-4414	Level of Care: ICF	Bed Capacity	26
	04130-4414			No
Mailing Address 8745 JAMES A REED RD	C4120 4414		DMH Licensed	
KANSAS CITY MO	64138-4414	Region 3 Medicaid	Facility Number	12724
JEANNE JUGAN CENTER				
8745 JAMES A REED ROAD		<b>Telephone</b> (816) 761-4744	Alzheimer's Unit	No
KANSAS CITY MO	64138-4414	Level of Care: RCF*	Bed Capacity	24
Mailing Address 8745 JAMES A REED RD		County JACKSON	DMH Licensed	No
	64138-4414	Region 3	Facility Number	12724
in in total care a second care	01130 1111	Region 5	Tuellity Tulliser	12/24
JEFFERSON CITY MANOR CARE CENTE	ER			
1720 VIETH DR		<b>Telephone</b> (573) 635-6193	Alzheimer's Unit	No
JEFFERSON CITY MO	65109-2522	Level of Care: SNF	<b>Bed Capacity</b>	102
Mailing Address 1720 VIETH DR		County COLE	DMH Licensed	No
JEFFERSON CITY MO	65109-2522	Region 6 Medicare/Medicaid	Facility Number	03870
JEFFERSON CITY NURSING AND REHAI	BILITATION CENTER, LLC			
1221 SOUTHGATE LN		<b>Telephone</b> (573) 635-3131	Alzheimer's Unit	Yes
JEFFERSON CITY MO	65109-2465	Level of Care: SNF	Bed Capacity	120
Mailing Address PO BOX 104118		County COLE	DMH Licensed	No
JEFFERSON CITY MO	65110-4118	Region 6 Medicare/Medicaid	Facility Number	01865
TEEEEDOOM CARDENO AGGGODD A TYPE	NC DV AMEDICA DE			
JEFFERSON GARDENS - ASSISTED LIVIN	NG BY AMERICARE	T-lh (CCO) 995 9779	All at a transmit of the trans	N.T.
509 WEST ROGERS ST	(4725 2549	Telephone (660) 885-9770	Alzheimer's Unit	No 42
	64735-2548	Level of Care: ALF**	Bed Capacity	42
Mailing Address 509 WEST ROGERS ST		County HENRY	DMH Licensed	No
CLINTON MO	64735-2548	Region 1	Facility Number	20603

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JEFFERSON HEALTH CARE				
615 SW OLDHAM PARKWAY		<b>Telephone</b> (816) 524-3328	Alzheimer's Unit	No
LEE'S SUMMIT	MO 64081-2602	Level of Care: SNF	Bed Capacity 12	20
Mailing Address 615 SW OLDHAM P	KWY	County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64081-2602	Region 3 Medicare/Medicaid	Facility Number 044	15
JEFFERSON MANOR CAPE GIRAI	PDFAILLI C			
902 JEFFERSON AVE	ADEAC LLC	<b>Telephone</b> (573) 651-1373	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63703-6755	Level of Care: RCF		10
Mailing Address 902 JEFFERSON AV		County CAPE GIRARDEAU		es
CAPE GIRARDEAU	MO 63703-6755	Region 2	Facility Number 0544	
CHE GRANDLING	NO 03703 0733	Region 2	racinty (uniber 034	+3
TOP OF A DV DEGUDENWAY OF DE	WOME			
JOE CLARK RESIDENTIAL CARE 1495 EAST ASHLAND ST	HUME	Tolonhono (417) (67 5000	Alahoimoula II!4	NT.o.
	MO 64772 4016	Telephone (417) 667-5000 Level of Care: ALF**		No 24
NEVADA	MO 64772-4016			34
Mailing Address PO BOX 246	MO (4772 024)	County VERNON		No
NEVADA	MO 64772-0246	Region 1	Facility Number 234	19
TOTAL WALL THE CARROLL CO.				
JOHN KNOX VILLAGE CARE CEN	TER	m		
600 NW PRYOR ROAD	NO (1001 1104	<b>Telephone</b> (816) 246-4343		es
LEE'S SUMMIT	MO 64081-1104	Level of Care: SNF		30
Mailing Address 600 NW PRYOR RD		County JACKSON		No
LEE'S SUMMIT	MO 64081-1104	Region 3 Medicare/Medicaid	Facility Number 1452	29
TOTINGON COLINION CARE CENTRE	TD.			
JOHNSON COUNTY CARE CENTE	K	T. I. I. (660) 747 0101	A11 * 1 TT */	. 7
122 EAST MARKET ST	MO (4002 1010	<b>Telephone</b> (660) 747-8101		No oz
WARRENSBURG	MO 64093-1818	Level of Care: ICF		87
Mailing Address 122 EAST MARKET		County JOHNSON		No
WARRENSBURG	MO 64093-1818	Region 3 Medicaid	Facility Number 0530	J9
IOI ET HOME				
JOLET HOME 3920 FOREST		<b>Telephone</b> (816) 531-5308	Alzheimer's Unit	No
KANSAS CITY	MO 64110-1220	Level of Care: RCF		17
Mailing Address 3920 FOREST	WIO 04110-1220	County JACKSON		es
KANSAS CITY	MO 64110-1220	•		
KANSAS CIT I	WIO 04110-1220	Region 3	Facility Number 0398	52
JONES' WILDWOOD CARE CENTI	FD			
12806 HWY 151	EK	<b>Telephone</b> (660) 291-8636	Alzheimer's Unit	No
MADISON	MO 65263-3114	Telephone (660) 291-8636 Level of Care: RCF		32
Mailing Address PO BOX 69	WIO 03203-3114	County MONROE	- :	es
S .	MO 65262 0060	•		
MADISON	MO 65263-0069	Region 5	Facility Number 085	13
JOPLIN GARDENS				
2810 SOUTH JACKSON AVE		<b>Telephone</b> (417) 572-0041	Alzheimer's Unit	No
JOPLIN	MO 64804-2524	Level of Care: SNF		92
Mailing Address 2810 SOUTH JACKS		County JASPER		No.
JOPLIN	MO 64804-2524	Region 1 Medicare/Medicaid	Facility Number 013	
JOI DIII	1120 01001 2321	region i Medical e/Medicald	1 acmity 1 tumber 013	, ,

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JOPLIN HEALTH AND REHABILI	TATION CENTER		
2218 WEST 32ND ST		<b>Telephone</b> (417) 623-5264	Alzheimer's Unit Yes
JOPLIN	MO 64804-3514	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 2218 WEST 32ND S	T	County NEWTON	DMH Licensed No
JOPLIN	MO 64804-3514	Region 1 Medicare/Medicaid	Facility Number 12583
JORDAN CREEK NURSING & REH	IAR		
910 SOUTH WEST AVE		<b>Telephone</b> (417) 865-8741	Alzheimer's Unit Yes
SPRINGFIELD	MO 65802-4950	Level of Care: SNF	Bed Capacity 120
Mailing Address 910 SOUTH WEST A		County GREENE	DMH Licensed No
SPRINGFIELD	MO 65802-4950		Facility Number 03245
SI KIIVOI IEED	MO 03802-4930	Region 1 Medicare/Medicaid	Facility Number 03243
JOY ADULT CARE CENTER		m	
614 SOUTH MAIN	1.0	<b>Telephone</b> (660) 885-8328	Alzheimer's Unit No
CLINTON	MO 64735-2620	Level of Care: RCF*	Bed Capacity 42
Mailing Address PO BOX 8		County HENRY	<b>DMH Licensed</b> Yes
CLINTON	MO 64735-0008	Region 1	Facility Number 07268
JOY ASSISTED LIVING FOR SENIO	ORS		
2030 W MOUNT VERNON ST		<b>Telephone</b> (417) 864-8805	Alzheimer's Unit No
SPRINGFIELD	MO 65802-4846	Level of Care: ALF	<b>Bed Capacity</b> 74
Mailing Address PO BOX 9655		County GREENE	<b>DMH Licensed</b> Yes
SPRINGFIELD	MO 65801-9655	Region 1	Facility Number 19668
KABUL NURSING HOMES, INC			
1000 MAIN ST		<b>Telephone</b> (417) 962-3713	Alzheimer's Unit No
CABOOL	MO 65689-9125	Level of Care: SNF	<b>Bed Capacity</b> 99
Mailing Address 1000 MAIN ST		County TEXAS	<b>DMH Licensed</b> No
CABOOL	MO 65689-9125	Region 1 Medicare/Medicaid	Facility Number 04085
Y A CENT BATCH A COTOMER I WING			
KASEY PAIGE ASSISTED LIVING 3715 JAMIESON AVE		<b>Telephone</b> (314) 781-0222	Alzheimer's Unit No
SAINT LOUIS	MO 63109-1109	Level of Care: ALF	
Mailing Address 3715 JAMIESON AV		·	
SAINT LOUIS	MO 63109-1109	Region 7	Facility Number 04650
KATY MANOR			
205 PROSPECT		<b>Telephone</b> (660) 834-3111	Alzheimer's Unit No
PILOT GROVE	MO 65276-1111	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 8	03270 1111	County COOPER	DMH Licensed No
•	MO 65276 0009	•	
PILOT GROVE	MO 65276-0008	Region 6 Medicare/Medicaid	Facility Number 14982
KEATON CENTER			
120 N MILL ST		<b>Telephone</b> (636) 232-2323	Alzheimer's Unit No
FESTUS	MO 63028-1816	Level of Care: ALF	Bed Capacity 16
Mailing Address 120 N MILL ST		County JEFFERSON	DMH Licensed Yes
FESTUS	MO 63028-1816	Region 2	Facility Number 20413
120100	05020 1010	Acgion 2	20413

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KIDWELL HOME				
1000 KIDWELL DR		<b>Telephone</b> (573) 378-5175	Alzheimer's Unit	No
VERSAILLES	MO 65084-1177	Level of Care: RCF*	Bed Capacity	44
Mailing Address 1000 KIDWELL DR		County MORGAN	DMH Licensed	No
VERSAILLES	MO 65084-1177	Region 6	Facility Number	21631
		region s		21001
KINGDOM CARE SENIOR LIVING	LLC			
811 CENTER ST		<b>Telephone</b> (573) 642-6646	Alzheimer's Unit	No
FULTON	MO 65251-1922	Level of Care: ALF	Bed Capacity	41
Mailing Address 811 CENTER ST		County CALLAWAY	DMH Licensed	No
FULTON	MO 65251-1922	Region 6	Facility Number	18735
KINGDOM CARE SENIOR LIVING	LLC			
811 CENTER ST		<b>Telephone</b> (573) 642-6646	Alzheimer's Unit	No
FULTON	MO 65251-1922	Level of Care: SNF	Bed Capacity	36
Mailing Address 811 CENTER ST		County CALLAWAY	DMH Licensed	No
FULTON	MO 65251-1922	Region 6 Medicare/Medicaid	Facility Number	18735
KING'S DAUGHTERS HOME, THE				
620 WEST BOULEVARD ST		<b>Telephone</b> (573) 581-1577	Alzheimer's Unit	No
MEXICO	MO 65265-2199	Level of Care: ICF	Bed Capacity	33
Mailing Address 620 WEST BOULEV.		County AUDRAIN	DMH Licensed	No
MEXICO	MO 65265-2199	Region 5	Facility Number	04146
		Region 5	Tuellity Pulliber	04140
KING'S DAUGHTERS HOME, THE				
620 WEST BOULEVARD ST		<b>Telephone</b> (573) 581-1577	Alzheimer's Unit	No
MEXICO	MO 65265-2199	Level of Care: RCF*	Bed Capacity	12
Mailing Address 620 WEST BOULEV	ARD ST	County AUDRAIN	DMH Licensed	No
MEXICO	MO 65265-2199	Region 5	Facility Number	04146
KINGSLAND WALK SENIOR LIVIN	NG			
868 KINGSLAND AVENUE		<b>Telephone</b> (314) 955-6884	Alzheimer's Unit	Yes
UNIVERSITY CITY	MO 63130-	Level of Care: ALF**	Bed Capacity	70
Mailing Address 868 KINGSLAND AV	/ENUE	County SAINT LOUIS COUNTY	DMH Licensed	No
UNIVERSITY CITY	MO 63130-	Region 7	Facility Number	32203
KINGSWOOD				
10000 WORNALL RD		<b>Telephone</b> (816) 942-0994	Alzheimer's Unit	Yes
KANSAS CITY	MO 64114-4359	Level of Care: SNF	Bed Capacity	86
Mailing Address 10000 WORNALL RI	D	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64114-4359	Region 3 Medicare/Medicaid	Facility Number	04152
KINGSWOOD				
10000 WORNALL RD		<b>Telephone</b> (816) 942-0994	Alzheimer's Unit	Yes
KANSAS CITY	MO 64114-4359	Level of Care: ALF**	Bed Capacity	67
Mailing Address 10000 WORNALL RI		County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64114-4359	Region 3	Facility Number	04152
		8		

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KIRKSVILLE MANOR CARE CEN	TER			
1705 EAST LAHARPE		<b>Telephone</b> (660) 665-3774	Alzheimer's Unit	No
KIRKSVILLE	MO 63501-3927	Level of Care: SNF	Bed Capacity	132
Mailing Address 1705 EAST LAHAR	PE	County ADAIR	DMH Licensed	No
KIRKSVILLE	MO 63501-3927	Region 5 Medicare/Medicaid	Facility Number	04161
KNOX COUNTY NURSING HOME	DICTRICT			
55774 STATE HIGHWAY 6	DISTRICT	<b>Telephone</b> (660) 397-2282	Alzheimer's Unit	No
EDINA	MO 63537-4253	Level of Care: SNF	Bed Capacity	60
Mailing Address 55774 STATE HIGH		County KNOX	DMH Licensed	No
EDINA	MO 63537-4253		Facility Number	04173
EDINA	WIO 03337-4233	Region 5 Medicare/Medicaid	Facility Number	041/3
LA BELLE MANOR CARE CENTE	CR CR	<b></b>		
1002 CENTRAL		<b>Telephone</b> (660) 213-3234	Alzheimer's Unit	Yes
LA BELLE	MO 63447-2092	Level of Care: SNF	Bed Capacity	94
Mailing Address 1002 CENTRAL		County LEWIS	DMH Licensed	No
LA BELLE	MO 63447-2092	Region 5 Medicare/Medicaid	Facility Number	04212
LA BONNE MAISON-ASSISTED L	IVING BY AMERICARE			
226 PLAZA DR		<b>Telephone</b> (573) 472-2546	Alzheimer's Unit	No
SIKESTON	MO 63801-5105	Level of Care: ALF**	<b>Bed Capacity</b>	30
Mailing Address 226 PLAZA DR		County SCOTT	DMH Licensed	No
SIKESTON	MO 63801-5105	Region 2	Facility Number	28804
LA PLATA NURSING HOME				
100 OLD STAGECOACH RD		<b>Telephone</b> (660) 332-4315	Alzheimer's Unit	No
LA PLATA	MO 63549-1362	Level of Care: SNF	Bed Capacity	52
Mailing Address 100 OLD STAGECO	OACH RD	County MACON	DMH Licensed	No
LA PLATA	MO 63549-1362	Region 5 Medicare/Medicaid	Facility Number	04395
LACLEDE COMMONS				
727 S LACLEDE STATION RD		<b>Telephone</b> (314) 968-5570	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63119-4911	Level of Care: ALF**	Bed Capacity	242
Mailing Address 727 S LACLEDE ST		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63119-4911	Region 7	Facility Number	17713
SAMAT ECOLO	1410 03117 4711	Region /	racinty Number	17713
LACOBA HOMES, INC				
850 HIGHWAY 60		<b>Telephone</b> (417) 235-7895	Alzheimer's Unit	No
MONETT	MO 65708-9376	Level of Care: SNF	Bed Capacity	79
Mailing Address PO BOX 885		County BARRY	DMH Licensed	No
MONETT	MO 65708-0885	Region 1 Medicare/Medicaid	Facility Number	04315
LAKE GEORGE ASSISTED LIVIN	G			
5000 EAST RICHLAND ROAD		<b>Telephone</b> (573) 442-0577	Alzheimer's Unit	No
COLUMBIA	MO 65201-9606	<b>Level of Care:</b> ALF**	Bed Capacity	10
Mailing Address 5000 EAST RICHLA	AND RD	County BOONE	DMH Licensed	No
COLUMBIA	MO 65201-9606	Region 6	Facility Number	28997

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LAKE PARKE SENIOR LIVING				
145 4TH ST		<b>Telephone</b> (573) 745-0874	Alzheimer's Unit	No
CAMDENTON	MO 65020-7138	Level of Care: RCF	Bed Capacity	48
Mailing Address 145 4TH ST		County CAMDEN	DMH Licensed	No
CAMDENTON	MO 65020-7138	Region 6	Facility Number	30084
I A WE OF OWA DI DO A COLOMBD I II	SUNIC A DA DEN CINTES			
LAKE ST CHARLES ASSISTED LIV	VING APARTMENTS	T-1 (626) 047 1100	A 1-1:!- T.I:4	No
45 HONEY LOCUST LN	MO (2202 5711	<b>Telephone</b> (636) 947-1100	Alzheimer's Unit	No 50
SAINT CHARLES	MO 63303-5711	Level of Care: ALF	Bed Capacity	50
Mailing Address 45 HONEY LOCUST		County SAINT CHARLES	DMH Licensed	No
SAINT CHARLES	MO 63303-5711	Region 5	Facility Number	18030
LAKE STOCKTON HEALTHCARE	FACILITY			
1523 3RD ROAD		<b>Telephone</b> (417) 276-5126	Alzheimer's Unit	Yes
STOCKTON	MO 65785-9608	Level of Care: SNF	Bed Capacity	90
Mailing Address PO BOX 945		County CEDAR	DMH Licensed	No
STOCKTON	MO 65785-0945	Region <sup>1</sup> Medicare/Medicaid	Facility Number	07680
LAKESHORES RESIDENTIAL CAR	RE FACILITY			
102 SOUTH BOLIVAR RD		<b>Telephone</b> (417) 754-2272	Alzheimer's Unit	No
HUMANSVILLE	MO 65674-8553	Level of Care: RCF*	Bed Capacity	30
Mailing Address PO BOX 221		County POLK	DMH Licensed	Yes
HUMANSVILLE	MO 65674-0221	Region 1	Facility Number	15309
LAKESIDE MANOR		T. I. I. (660) 420 0050		
810 KENNEDY DRIVE		<b>Telephone</b> (660) 438-8850	Alzheimer's Unit	No
WARSAW	MO 65355-3044	Level of Care: RCF*	Bed Capacity	35
Mailing Address PO BOX 280	140 (5255 0200	County BENTON	DMH Licensed	Yes
WARSAW	MO 65355-0280	Region 6	Facility Number	05970
LAKESIDE MOUNTAIN MANOR				
238 HARMONY HEIGHTS		<b>Telephone</b> (417) 546-5595	Alzheimer's Unit	No
FORSYTH	MO 65653-5533	Level of Care: RCF	Bed Capacity	40
Mailing Address 238 HARMONY HE	IGHTS	County TANEY	DMH Licensed	Yes
FORSYTH	MO 65653-5533	Region 1	Facility Number	06232
LAKESIDE SUITES				
205 TIMBERLINE DR		<b>Telephone</b> (660) 547-3322	Alzheimer's Unit	No
LINCOLN	MO 65338-2007	Level of Care: ALF	Bed Capacity	14
Mailing Address 205 TIMBERLINE D	PR .	County BENTON	DMH Licensed	No
LINCOLN	MO 65338-2007	Region 6	Facility Number	04803
LAKEVIEW HEALTH CARE & RE	HARILITATION CENTER			
1450 ASHLEY RD	MINIMITON CENTER	<b>Telephone</b> (660) 882-7007	Alzheimer's Unit	No
BOONVILLE	MO 65233-2141	Level of Care: SNF	Bed Capacity	60
Mailing Address 1450 ASHLEY RD		County COOPER	DMH Licensed	No
BOONVILLE	MO 65233-2141	Region 6 Medicare/Medicaid	Facility Number	01602
_ = = = 1111111111111111111111111111111		Megion - Medical difficultatu		01002

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LAKEVIEW HEALTH CARE & REF	HABILITATION CENTER		
1450 ASHLEY RD		<b>Telephone</b> (660) 882-7007	Alzheimer's Unit No
BOONVILLE	MO 65233-2141	Level of Care: ICF	Bed Capacity 19
Mailing Address 1450 ASHLEY RD		County COOPER	DMH Licensed No
BOONVILLE	MO 65233-2141	Region 6 Medicaid	Facility Number 01602
		3	
LAKEVIEW HEALTH CARE & REH	HABILITATION CENTER		
1450 ASHLEY RD		<b>Telephone</b> (660) 882-7007	Alzheimer's Unit No
BOONVILLE	MO 65233-2141	Level of Care: RCF*	Bed Capacity 17
Mailing Address 1450 ASHLEY RD		County COOPER	DMH Licensed No
BOONVILLE	MO 65233-2141	Region 6	Facility Number 01602
BOONVILLE	WO 03233-2141	Region 0	racinty Number 01002
LAKEWOOD - ASSISTED LIVING B	RV AMERICARE		
4685 ROBBERSON AVE	T INVIDITE THE	<b>Telephone</b> (417) 881-1411	Alzheimer's Unit Yes
SPRINGFIELD	MO 65810-1785	Level of Care: ALF**	Bed Capacity 67
			• •
Mailing Address 4685 ROBBERSON A		•	
SPRINGFIELD	MO 65810-1785	Region 1	Facility Number 23613
LAMPLIGHT VILLAGE			
309 LOCUST ST		<b>Telephone</b> (417) 256-2749	Alzheimer's Unit No
WEST PLAINS	MO 65775-3906	Level of Care: RCF*	Bed Capacity 32
Mailing Address PO BOX 166	MO 03773 3700	County HOWELL	DMH Licensed Yes
WEST PLAINS	MO 65775-0166		
WEST PLAINS	MO 03773-0100	Region 1	Facility Number 21563
LANDING OF O'FALLON, THE			
1000 LANDING CIRCLE		<b>Telephone</b> (636) 669-0780	Alzheimer's Unit Yes
SAINT CHARLES	MO 63304-7647	Level of Care: ALF**	<b>Bed Capacity</b> 142
Mailing Address 1000 LANDING CIRC	CLE	County SAINT CHARLES	DMH Licensed No
SAINT CHARLES	MO 63304-7647	Region 5	Facility Number 31181
		Region	2 demog 1 damoer 31101
LANDMARK VILLA ALF			
1101 OZARK AVE		<b>Telephone</b> (417) 962-3700	Alzheimer's Unit No
CABOOL	MO 65689-7362	Level of Care: ALF	Bed Capacity 44
Mailing Address 1101 OZARK AVE		County TEXAS	DMH Licensed Yes
CABOOL	MO 65689-7362	Region 1	Facility Number 04085
LANGBOUNTE MEA LOS			
LANSDOWNE VILLAGE		m	
4624 LANSDOWNE AVE		<b>Telephone</b> (314) 351-6888	Alzheimer's Unit Yes
SAINT LOUIS	MO 63116-1523	Level of Care: SNF	<b>Bed Capacity</b> 145
Mailing Address 4624 LANSDOWNE	AVE	County SAINT LOUIS CITY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63116-1523	Region 7 Medicare/Medicaid	Facility Number 14557
LAURIE CARE CENTER			
610 HWY O		<b>Telephone</b> (573) 374-8263	Alzheimer's Unit Yes
LAURIE	MO 65038-1068	Level of Care: SNF	Bed Capacity 108
Mailing Address PO BOX 1068		County MORGAN	DMH Licensed No
LAURIE	MO 65038-1068	Region 6 Medicare/Medicaid	Facility Number 04449
	1.13 05050 1000	region o medical e/Medicald	- acincy 1 (ambe) 04449

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LAURIE KNOLLS				
610 HIGHWAY O		<b>Telephone</b> (573) 374-8263	Alzheimer's Unit	
LAURIE	MO 65038-1068	Level of Care: RCF*	Bed Capacity 66	5
Mailing Address PO BOX 1068		County MORGAN	DMH Licensed No.	Э
LAURIE	MO 65038-1068	Region 6	Facility Number 04449	9
LAVERNA SENIOR LIVING				
904 HALL AVE		<b>Telephone</b> (816) 324-3185	Alzheimer's Unit Yes	
SAVANNAH	MO 64485-1952	Level of Care: SNF	Bed Capacity 120	
Mailing Address 904 HALL AVE		County ANDREW	DMH Licensed No	
SAVANNAH	MO 64485-1952	Region 4 Medicare/Medicaid	Facility Number 04478	3
LAWRENCE COUNTY MANOR				
915 CARL ALLEN ST		<b>Telephone</b> (417) 466-2183	Alzheimer's Unit Yes	s
MT VERNON	MO 65712-1612	Level of Care: SNF	Bed Capacity 90	0
Mailing Address 915 CARL ALLEN ST		County LAWRENCE	DMH Licensed No	0
MT VERNON	MO 65712-1612	Region 1 Medicare/Medicaid	Facility Number 04349	
		Troutent of Troutent	0.00	
LAWRENCE COUNTY RESIDENTIA	AL CARE CENTER			
915 CARL ALLEN ST		<b>Telephone</b> (417) 466-2183	Alzheimer's Unit No	
MT VERNON	MO 65712-1612	Level of Care: RCF*	Bed Capacity 30	
Mailing Address 915 CARL ALLEN ST		County LAWRENCE	DMH Licensed No.	С
MT VERNON	MO 65712-1612	Region 1	Facility Number 04349	)
LAWSON MANOR & REHAB				
210 WEST 8TH TERRACE		<b>Telephone</b> (816) 580-3269	Alzheimer's Unit Yes	s
LAWSON	MO 64062-9357	Level of Care: SNF	Bed Capacity 60	0
Mailing Address 210 WEST 8TH TERR	RACE	County RAY	DMH Licensed No	0
LAWSON	MO 64062-9357	Region 4 Medicare/Medicaid	Facility Number 07395	5
A ED ANON NODWY NUDGING & DE	TA D			
LEBANON NORTH NURSING & RE	нав	TE 1 1 (417) 522 0172		
596 MORTON RD	MO 65526 2649	<b>Telephone</b> (417) 532-9173	Alzheimer's Unit Yes	
LEBANON 506 MODEON DD	MO 65536-3648	Level of Care: SNF	Bed Capacity 180	
Mailing Address 596 MORTON RD	MO 65526 2649	County LACLEDE	DMH Licensed No	
LEBANON	MO 65536-3648	Region 1 Medicare/Medicaid	Facility Number 04369	j
LEBANON SOUTH NURSING & REI	HAB			
514 WEST FREMONT RD		<b>Telephone</b> (417) 532-5351	Alzheimer's Unit No	О
LEBANON	MO 65536-4244	Level of Care: RCF	Bed Capacity 68	8
Mailing Address 514 WEST FREMON	ΓROAD	County LACLEDE	DMH Licensed No	o
LEBANON	MO 65536-4244	Region 1	Facility Number 15650	Э
LEBANON SOUTH NURSING & REI	НАВ			
514 WEST FREMONT ROAD	<del></del>	<b>Telephone</b> (417) 532-5351	Alzheimer's Unit No	о
LEBANON	MO 65536-4244	Level of Care: SNF	Bed Capacity 116	
Mailing Address 514 WEST FREMON		County LACLEDE	DMH Licensed No	
**************************************				

Medicare/Medicaid

**Facility Number** 

15650

MO 65536-4244

LEBANON

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LEE HOUSE SENIOR LIVING LLC				
105 NORTH MILL ST		<b>Telephone</b> (573) 392-5558	Alzheimer's Unit	No
ELDON	MO 65026-1728	Level of Care: RCF	Bed Capacity	53
Mailing Address 105 NORTH MILL ST		County MILLER	DMH Licensed	No
ELDON	MO 65026-1728	Region 6	Facility Number	13089
LEE'S SUMMIT POINTE HEALTH &	REHABILITATION			
1501 SW 3RD ST	-	<b>Telephone</b> (816) 525-6300	Alzheimer's Unit	No
LEE'S SUMMIT	MO 64081-2424	Level of Care: SNF	Bed Capacity	60
Mailing Address 1501 SW 3RD ST		County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64081-2424	Region 3 Medicare/Medicaid		12484
			•	
LEGENDARY NURSING & REHABII	LITATION LLC	T		
809 EAST GORDON ST	1.0	<b>Telephone</b> (660) 886-2247	Alzheimer's Unit	No
MARSHALL	MO 65340-2811	Level of Care: SNF	Bed Capacity	92
Mailing Address 809 EAST GORDON S		County SALINE	DMH Licensed	No
MARSHALL	MO 65340-2811	Region 5 Medicare/Medicaid	Facility Number	04895
LEISURE LIVING				
305 5TH ST		<b>Telephone</b> (417) 235-5959	Alzheimer's Unit	No
MONETT	MO 65708-2312	Level of Care: RCF	Bed Capacity	20
Mailing Address 305 5TH ST		County BARRY	DMH Licensed	Yes
MONETT	MO 65708-2312	Region 1	<b>Facility Number</b>	18227
LENOIR HEALTH CARE CENTER				
3850 CARTWRIGHT LANE				
		Tolonhono (572) 976 5900	Alzhoimon'a Unit	NΙα
	MO 65201	Telephone (573) 876-5800	Alzheimer's Unit	No
COLUMBIA	MO 65201-	Level of Care: SNF	Bed Capacity	100
COLUMBIA  Mailing Address 3850 CARTWRIGHT I	LANE	Level of Care: SNF County BOONE	Bed Capacity DMH Licensed	100 No
COLUMBIA		Level of Care: SNF	Bed Capacity DMH Licensed	100
COLUMBIA  Mailing Address 3850 CARTWRIGHT I	LANE	Level of Care: SNF County BOONE	Bed Capacity DMH Licensed	100 No
COLUMBIA  Mailing Address 3850 CARTWRIGHT I	LANE	Level of Care: SNF County BOONE	Bed Capacity DMH Licensed	100 No
COLUMBIA  Mailing Address 3850 CARTWRIGHT I  COLUMBIA	LANE	Level of Care: SNF County BOONE	Bed Capacity DMH Licensed	100 No
COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA  LENOIR MANOR	LANE	Level of Care: SNF County BOONE Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	100 No 04750
COLUMBIA  Mailing Address 3850 CARTWRIGHT I  COLUMBIA  LENOIR MANOR  3850 CARTWRIGHT LANE	MO 65201-	Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 876-5800	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit	100 No 04750 Yes
COLUMBIA  Mailing Address 3850 CARTWRIGHT I  COLUMBIA  LENOIR MANOR  3850 CARTWRIGHT LANE  COLUMBIA	MO 65201-	Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 876-5800 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	100 No 04750 Yes 92
COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA  LENOIR MANOR 3850 CARTWRIGHT LANE COLUMBIA  Mailing Address 3850 CARTWRIGHT I	MO 65201- MO 65201- ANE	Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 876-5800 Level of Care: ALF** County BOONE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	100 No 04750 Yes 92 No
COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA  LENOIR MANOR 3850 CARTWRIGHT LANE COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA	MO 65201- MO 65201- ANE	Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 876-5800 Level of Care: ALF** County BOONE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	100 No 04750 Yes 92 No
COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA  LENOIR MANOR 3850 CARTWRIGHT LANE COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA  LEONA HOUSE	MO 65201- MO 65201- ANE	Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 876-5800 Level of Care: ALF** County BOONE Region 6	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	100 No 04750 Yes 92 No 04750
COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA  LENOIR MANOR 3850 CARTWRIGHT LANE COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA	MO 65201- MO 65201- ANE	Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 876-5800 Level of Care: ALF** County BOONE Region 6  Telephone (816) 584-1033	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	100 No 04750 Yes 92 No
COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA  LENOIR MANOR 3850 CARTWRIGHT LANE COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA  LEONA HOUSE 5000 NW OLD TRAIL ROAD KANSAS CITY	MO 65201-  MO 65201-  ANE  MO 65201-  MO 65201-	Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 876-5800 Level of Care: ALF** County BOONE Region 6  Telephone (816) 584-1033 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	100 No 04750 Yes 92 No 04750
COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA  LENOIR MANOR 3850 CARTWRIGHT LANE COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA  LEONA HOUSE 5000 NW OLD TRAIL ROAD	MO 65201-  MO 65201-  ANE  MO 65201-  MO 65201-	Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 876-5800 Level of Care: ALF** County BOONE Region 6  Telephone (816) 584-1033 Level of Care: ALF** County PLATTE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	100 No 04750 Yes 92 No 04750 Yes 7 No
COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA  LENOIR MANOR 3850 CARTWRIGHT LANE COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA  LEONA HOUSE 5000 NW OLD TRAIL ROAD KANSAS CITY  Mailing Address 5000 NW OLD TRAIL	MO 65201-  MO 65201-  ANE  MO 65201-  MO 65201-  MO 64151-1946  RD	Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 876-5800 Level of Care: ALF** County BOONE Region 6  Telephone (816) 584-1033 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	100 No 04750 Yes 92 No 04750 Yes 7
COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA  LENOIR MANOR 3850 CARTWRIGHT LANE COLUMBIA  Mailing Address 3850 CARTWRIGHT I COLUMBIA  LEONA HOUSE 5000 NW OLD TRAIL ROAD KANSAS CITY  Mailing Address 5000 NW OLD TRAIL KANSAS CITY	MO 65201-  MO 65201-  ANE  MO 65201-  MO 65201-  MO 64151-1946  RD  MO 64151-1946	Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 876-5800 Level of Care: ALF** County BOONE Region 6  Telephone (816) 584-1033 Level of Care: ALF** County PLATTE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	100 No 04750 Yes 92 No 04750 Yes 7 No
COLUMBIA  Mailing Address 3850 CARTWRIGHT II COLUMBIA  LENOIR MANOR 3850 CARTWRIGHT LANE COLUMBIA  Mailing Address 3850 CARTWRIGHT II COLUMBIA  LEONA HOUSE 5000 NW OLD TRAIL ROAD KANSAS CITY  Mailing Address 5000 NW OLD TRAIL KANSAS CITY  LEVERING REGIONAL HEALTH CA	MO 65201-  MO 65201-  ANE  MO 65201-  MO 65201-  MO 64151-1946  RD  MO 64151-1946	Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 876-5800 Level of Care: ALF** County BOONE Region 6  Telephone (816) 584-1033 Level of Care: ALF** County PLATTE Region 4	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	100 No 04750 Yes 92 No 04750 Yes 7 No 24748
COLUMBIA  Mailing Address 3850 CARTWRIGHT II COLUMBIA  LENOIR MANOR 3850 CARTWRIGHT LANE COLUMBIA  Mailing Address 3850 CARTWRIGHT II COLUMBIA  LEONA HOUSE 5000 NW OLD TRAIL ROAD KANSAS CITY  Mailing Address 5000 NW OLD TRAIL KANSAS CITY  LEVERING REGIONAL HEALTH CA	MO 65201-  MO 65201-  ANE  MO 65201-  MO 64151-1946  RD  MO 64151-1946  ARE CENTER	Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 876-5800 Level of Care: ALF** County BOONE Region 6  Telephone (816) 584-1033 Level of Care: ALF** County PLATTE Region 4  Telephone (573) 221-2930	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	100 No 04750 Yes 92 No 04750 Yes 7 No 24748
COLUMBIA  Mailing Address 3850 CARTWRIGHT II COLUMBIA  LENOIR MANOR 3850 CARTWRIGHT LANE COLUMBIA  Mailing Address 3850 CARTWRIGHT II COLUMBIA  LEONA HOUSE 5000 NW OLD TRAIL ROAD KANSAS CITY  Mailing Address 5000 NW OLD TRAIL KANSAS CITY  LEVERING REGIONAL HEALTH CA 1734 MARKET ST HANNIBAL	MO 65201-  MO 65201-  ANE  MO 65201-  MO 65201-  MO 64151-1946  RD  MO 64151-1946	Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 876-5800 Level of Care: ALF** County BOONE Region 6  Telephone (816) 584-1033 Level of Care: ALF** County PLATTE Region 4  Telephone (573) 221-2930 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	100 No 04750 Yes 92 No 04750 Yes 7 No 24748
COLUMBIA  Mailing Address 3850 CARTWRIGHT II COLUMBIA  LENOIR MANOR 3850 CARTWRIGHT LANE COLUMBIA  Mailing Address 3850 CARTWRIGHT II COLUMBIA  LEONA HOUSE 5000 NW OLD TRAIL ROAD KANSAS CITY  Mailing Address 5000 NW OLD TRAIL KANSAS CITY  LEVERING REGIONAL HEALTH CA	MO 65201-  MO 65201-  ANE  MO 65201-  MO 64151-1946  RD  MO 64151-1946  ARE CENTER	Level of Care: SNF County BOONE Region 6 Medicare/Medicaid  Telephone (573) 876-5800 Level of Care: ALF** County BOONE Region 6  Telephone (816) 584-1033 Level of Care: ALF** County PLATTE Region 4  Telephone (573) 221-2930	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	100 No 04750 Yes 92 No 04750 Yes 7 No 24748

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LEVERING REGIONAL HEALTH	CARE CENTER			
1734 MARKET ST		<b>Telephone</b> (573) 221-2930	Alzheimer's Unit	No
HANNIBAL	MO 63401-4025	Level of Care: RCF*	<b>Bed Capacity</b>	35
Mailing Address 1734 MARKET ST		County MARION	DMH Licensed	Yes
HANNIBAL	MO 63401-4025	Region 5	Facility Number	15954
LEWIS & CLARK GARDENS				
1221 BOONES LICK RD		<b>Telephone</b> (636) 946-6140	Alzheimer's Unit	No
SAINT CHARLES	MO 63301-2328	Telephone (636) 946-6140 Level of Care: SNF	Bed Capacity	142
Mailing Address 1221 BOONES LICK			DMH Licensed	No
SAINT CHARLES	MO 63301-2328	• • • •		
SAINT CHARLES	WO 03301-2326	Region 5 Medicare/Medicaid	Facility Number	01266
LEWIS COUNTY NURSING HOME	DISTRICT			
17528 STATE HIGHWAY 81 N		<b>Telephone</b> (573) 288-4454	Alzheimer's Unit	Yes
CANTON	MO 63435-3463	Level of Care: SNF	Bed Capacity	120
Mailing Address PO BOX 266		County LEWIS	DMH Licensed	No
CANTON	MO 63435-0266	Region 5 Medicare/Medicaid	Facility Number	04790
LIBERTY HEALTH & WELLNESS				
2201 GLENN HENDREN DR		<b>Telephone</b> (816) 736-8800	Alzheimer's Unit	No
LIBERTY	MO 64068-3375	Level of Care: SNF	Bed Capacity	143
Mailing Address 2201 GLENN HEND	REN DR	County CLAY	DMH Licensed	No
LIBERTY	MO 64068-3375	Region 4 Medicare/Medicaid	Facility Number	16715
LICKING RESIDENTIAL CARE				
225 WEST HIGHWAY 32		<b>Telephone</b> (573) 674-2207	Alzheimer's Unit	No
LICKING	MO 65542-9832	Level of Care: RCF*	Bed Capacity	34
Mailing Address 225 WEST HIGHWA	AY 32	County TEXAS	DMH Licensed	No
LICKING	MO 65542-9832	Region 1	Facility Number	24302
LIFE CARE CENTER OF BRIDGET	ΓON			
12145 BRIDGETON SQUARE DR		<b>Telephone</b> (314) 298-7444	Alzheimer's Unit	No
BRIDGETON	MO 63044-2616	Level of Care: SNF	Bed Capacity	91
Mailing Address 12145 BRIDGETON	SQUARE DR	County SAINT LOUIS COUNTY	DMH Licensed	No
BRIDGETON	MO 63044-2616	Region 7 Medicare/Medicaid	Facility Number	12141
LIFE CARE CENTER OF BROOKF	TELD			
315 HUNT ST		<b>Telephone</b> (660) 258-3367	Alzheimer's Unit	Yes
BROOKFIELD	MO 64628-2412	Level of Care: SNF	<b>Bed Capacity</b>	120
Mailing Address 315 HUNT ST		County LINN	DMH Licensed	No
BROOKFIELD	MO 64628-2412	Region 5 Medicare/Medicaid	Facility Number	00822
LIFE CARE CENTER OF CAPE GI	RARDEAU			
365 SOUTH BROADVIEW ST		<b>Telephone</b> (573) 335-2086	Alzheimer's Unit	No
CAPE GIRARDEAU	MO 63703-5725	Level of Care: SNF	Bed Capacity	120
Mailing Address 365 SOUTH BROAD	OVIEW ST	<b>County</b> CAPE GIRARDEAU	DMH Licensed	No
CAPE GIRARDEAU	MO 63703-5725	Region 2 Medicare/Medicaid	Facility Number	01032

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LIFE CARE CENTER OF CARROLLTO	)N		
300 LIFE CARE LN		<b>Telephone</b> (660) 542-0155	<b>Alzheimer's Unit</b> Yes
CARROLLTON M	O 64633-1861	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 300 LIFE CARE LN		County CARROLL	<b>DMH Licensed</b> No
CARROLLTON M	O 64633-1861	Region 4 Medicare/Medicaid	Facility Number 11500
LIFE CARE CENTER OF GRANDVIEW	7		
6301 EAST 125TH ST		<b>Telephone</b> (816) 765-7714	Alzheimer's Unit Yes
	O 64030-1884	Level of Care: SNF	Bed Capacity 172
Mailing Address 6301 EAST 125TH ST		County JACKSON	DMH Licensed No
GRANDVIEW M	O 64030-1884	Region 3 Medicare/Medicaid	Facility Number 11929
LIEE CADE CENTED OF STI OHIS			
LIFE CARE CENTER OF ST LOUIS 3520 CHOUTEAU AVE		<b>Telephone</b> (314) 771-2100	Alzheimer's Unit No
	O 63103-2916	Level of Care: SNF	Bed Capacity 100
Mailing Address 3520 CHOUTEAU AVE	0 03103-2710	County SAINT LOUIS CITY	DMH Licensed No
e e e e e e e e e e e e e e e e e e e	O 63103-2916	Region 7 Medicare/Medicaid	Facility Number 19823
SAINI LOOIS IVI	0 03103-2710	Region / Wedicare/Medicard	racinty Number 19823
LIFE CARE CENTER OF SULLIVAN			
875 DUNSFORD DR		<b>Telephone</b> (573) 468-3128	Alzheimer's Unit No
SULLIVAN M	O 63080-1238	Level of Care: SNF	Bed Capacity 120
Mailing Address 875 DUNSFORD DR		County FRANKLIN	DMH Licensed No
SULLIVAN M	O 63080-1238	Region 6 Medicare/Medicaid	Facility Number 07744
LIFE CARE CENTER OF WAYNESVILI	LE		
700 BIRCH LN		<b>Telephone</b> (573) 774-6456	<b>Alzheimer's Unit</b> Yes
	O 65583-2275	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 700 BIRCH LN		County PULASKI	<b>DMH Licensed</b> No
WAYNESVILLE M	O 65583-2275	Region 6 Medicare/Medicaid	Facility Number 04592
LIFE ENHANCEMENT VILLAGE			
732 SOUTH GREGG ROAD		<b>Telephone</b> (417) 725-6671	Alzheimer's Unit No
	O 65714-7419	Level of Care: RCF*	Bed Capacity 44
Mailing Address 732 SOUTH GREGG RD		County CHRISTIAN	DMH Licensed Yes
_	O 65714-7419	Region 1	Facility Number 14190
		8	•
LINCOLN COMMUNITY CARE CENTE	ER		
205 TIMBERLINE DR		<b>Telephone</b> (660) 547-3322	Alzheimer's Unit No
LINCOLN M	O 65338-2007	Level of Care: SNF	<b>Bed Capacity</b> 66
Mailing Address 205 TIMBERLINE DR		County BENTON	<b>DMH Licensed</b> No
LINCOLN M	O 65338-2007	Region 6 Medicare/Medicaid	Facility Number 04803
LINCOLN COUNTY NURSING & REHA	AR		
1145 EAST CHERRY ST	<del></del>	<b>Telephone</b> (636) 528-5712	Alzheimer's Unit No
	O 63379-1520	Level of Care: SNF	Bed Capacity 90
Mailing Address PO BOX 130		County LINCOLN	DMH Licensed No
_	O 63379-0130	Region 5 Medicare/Medicaid	Facility Number 15750
IVI	.5 55577 0150	region - Miculcal Chileulcalu	2 memory 110moet 15/50

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LINDELL MANOR		T. 1 (211) 572 1020	
4336 LINDELL BLVD		<b>Telephone</b> (314) 652-4828	Alzheimer's Unit No
SAINT LOUIS	MO 63108-2702	Level of Care: RCF*	Bed Capacity 24
Mailing Address PO BOX 525	MO (545)	County SAINT LOUIS CITY	DMH Licensed Yes
CUBA	MO 65453-	Region 7	Facility Number 10470
LINDEN WOODS VILLAGE			
2901 NE 72ND STREET		<b>Telephone</b> (816) 268-4000	Alzheimer's Unit No
GLADSTONE  GLADSTONE	MO 64119-7400	Level of Care: ALF**	Bed Capacity 40
Mailing Address 2901 NE 72ND STREE		County CLAY	DMH Licensed No
GLADSTONE	MO 64119-7400	Region 4	Facility Number 30156
GLADSTONE	MO 04119-7400	Region +	Facility Number 50150
LINDEN WOODS VILLAGE			
2901 NE 72ND STREET		<b>Telephone</b> (816) 268-4000	Alzheimer's Unit NO
GLADSTONE	MO 64119-7400	Level of Care: SNF	<b>Bed Capacity</b> 40
Mailing Address 2901 NE 72ND STRE	ET	County CLAY	DMH Licensed No
GLADSTONE	MO 64119-7400	Region 4 Medicare/Medicaid	Facility Number 30156
		777047041 0/1120410414	30100
LINN OAK REHABILITATION CEN	TER		
196 HIGHWAY CC		<b>Telephone</b> (573) 897-0700	Alzheimer's Unit no
LINN	MO 65051-3500	Level of Care: SNF	<b>Bed Capacity</b> 132
Mailing Address 196 HIGHWAY CC		County OSAGE	<b>DMH Licensed</b> No
LINN	MO 65051-3500	Region 6 Medicare/Medicaid	Facility Number 14130
LIVING CENTER, THE			
2506 LINDEN TREE PARKWAY		<b>Telephone</b> (660) 886-9676	Alzheimer's Unit Yes
MARSHALL	MO 65340-0017	Level of Care: SNF	Bed Capacity 99
Mailing Address PO BOX 370	WO 03340-0017	County SALINE	DMH Licensed No
MARSHALL	MO 65340-0370	Region 5 Medicare/Medicaid	Facility Number 21791
MAKSHALL	MO 03340-0370	Region 5 Medicare/Medicaid	Facility Number 21/91
LIVING COMMUNITY OF ST JOSEI	РН		
1202 HEARTLAND RD		<b>Telephone</b> (816) 671-8500	Alzheimer's Unit No
SAINT JOSEPH	MO 64506-3200	Level of Care: SNF	<b>Bed Capacity</b> 96
Mailing Address 1202 HEARTLAND R	dD.	County BUCHANAN	DMH Licensed No
SAINT JOSEPH	MO 64506-3200	Region 4 Medicare/Medicaid	Facility Number 24179
I IVING COMMUNITY OF ST TOSE	DH		
LIVING COMMUNITY OF ST JOSEI 1202 HEARTLAND RD	111	Tolophono (916) 671 9500	Alghaiman's This
SAINT JOSEPH	MO 64506-3200	<b>Telephone</b> (816) 671-8500	Alzheimer's Unit No
		Level of Care: ALF County BUCHANAN	Bed Capacity 35 DMH Licensed No
Mailing Address 1202 HEARTLAND R			
SAINT JOSEPH	MO 64506-3200	Region 4	Facility Number 24179
LIVINGSTON MANOR CARE CENT	ER		
939 E BIRCH DR		<b>Telephone</b> (660) 646-5177	<b>Alzheimer's Unit</b> Yes
CHILLICOTHE	MO 64601-2189	Level of Care: SNF	<b>Bed Capacity</b> 94
Mailing Address 939 E BIRCH DR		County LIVINGSTON	DMH Licensed No
CHILLICOTHE	MO 64601-2189	Region 4 Medicare/Medicaid	Facility Number 20099

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LOCH HAVEN			
701 SUNSET HILLS DR		<b>Telephone</b> (660) 385-3113	Alzheimer's Unit Yes
MACON	MO 63552-2165	Level of Care: SNF	Bed Capacity 160
Mailing Address PO BOX 187		County MACON	DMH Licensed No
MACON	MO 63552-0187	Region 5 Medicare/Medicaid	Facility Number 04739
			·
LOCH HAVEN			
701 SUNSET HILLS DR		<b>Telephone</b> (660) 385-3113	Alzheimer's Unit No
MACON	MO 63552-2165	Level of Care: RCF*	<b>Bed Capacity</b> 26
Mailing Address PO BOX 187		County MACON	<b>DMH Licensed</b> No
MACON	MO 63552-0187	Region 5	Facility Number 04739
LODGE RESIDENTIAL CARE FAC	ILITY, THE		
3860 EAST 60TH ST		<b>Telephone</b> (816) 599-5235	Alzheimer's Unit No
KANSAS CITY	MO 64130-4418	Level of Care: RCF	Bed Capacity 8
Mailing Address 3860 EAST 60TH ST		County JACKSON	DMH Licensed No
KANSAS CITY	MO 64130-4418	Region 3	Facility Number 16211
LODGE, THE		T. 1 1 (((0) 249 2277	A11
542 STATE ROAD DD FAYETTE	MO 65248-9658	Telephone (660) 248-2277  Level of Care: ALF**	Alzheimer's Unit No Bed Capacity 60
Mailing Address 542 STATE RD DD	MO 03248-9038	County HOWARD	Bed Capacity 60  DMH Licensed Yes
FAYETTE	MO 65248-9658	Region 5	Facility Number 28815
TATELLE	WO 03240 7030	Acgion 5	racinty Number 20013
LODGES, THE			
2401 W GRAND ST		<b>Telephone</b> (417) 864-4545	Alzheimer's Unit No
SPRINGFIELD	MO 65802-4967	Level of Care: RCF*	<b>Bed Capacity</b> 99
Mailing Address 2401 W GRAND ST		County GREENE	<b>DMH Licensed</b> Yes
SPRINGFIELD	MO 65802-4967	Region 1	Facility Number 09756
LOVING ARMS MEMORY CARE A	ND ASSISTED LIVING		
1300 EAST 24TH ST		<b>Telephone</b> (660) 851-2266	Alzheimer's Unit yes
SEDALIA	MO 65301-8233	Level of Care: ALF**	Bed Capacity 20
Mailing Address 1300 EAST 24TH ST	REET	County PETTIS	DMH Licensed No
SEDALIA	MO 65301-8233	Region 6	Facility Number 15971
LUTHER MANOR RETIREMENT &	z NURSING CENTER		
3170 HIGHWAY 61 NORTH		<b>Telephone</b> (573) 221-5533	Alzheimer's Unit No
HANNIBAL	MO 63401-6571	Level of Care: SNF	<b>Bed Capacity</b> 64
Mailing Address 3170 HWY 61 NORT	Ή	County MARION	DMH Licensed No
HANNIBAL	MO 63401-6571	Region 5 Medicare/Medicaid	Facility Number 04673
LUTHERAN CONVALESCENT HO	ME		
723 SOUTH LACLEDE STATION RD	·· <del>·</del>	<b>Telephone</b> (314) 968-5570	Alzheimer's Unit No
WEBSTER GROVES	MO 63119-4911	Level of Care: SNF	Bed Capacity 286
Mailing Address 723 SOUTH LACLEI		County SAINT LOUIS COUNTY	DMH Licensed No
WEBSTER GROVES	MO 63119-4911	Region 7 Medicare/Medicaid	Facility Number 04695
		-	

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LUTHERAN GOOD SHEPHERD HOM	ME		
202 S WEST ST		<b>Telephone</b> (660) 463-2267	Alzheimer's Unit No
CONCORDIA	MO 64020-9643	Level of Care: ALF**	<b>Bed Capacity</b> 53
Mailing Address PO BOX 849		County LAFAYETTE	<b>DMH Licensed</b> No
CONCORDIA	MO 64020-0849	Region 3	Facility Number 27122
		3	
LUTHERAN GOOD SHEPHERD HOM	ME		
202 S WEST ST		<b>Telephone</b> (660) 463-2267	Alzheimer's Unit No
CONCORDIA	MO 64020-9643	Level of Care: ICF	Bed Capacity 36
Mailing Address PO BOX 849	110 04020 7043	County LAFAYETTE	DMH Licensed No
CONCORDIA	MO 64020-0849	Region 3	
CONCORDIA	WO 04020-0849	Kegion 3	Facility Number 27122
I UTHED AN HOME ASSISTED I IVIN	NC		
LUTHERAN HOME ASSISTED LIVIN 2825 BLOOMFIELD RD	NU	<b>Telephone</b> (573) 335-0158	Alzheimer's Unit No
	MO (2702 (225	• '	
CAPE GIRARDEAU	MO 63703-6335		Bed Capacity 115
Mailing Address 2825 BLOOMFIELD R		County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63703-6335	Region 2	Facility Number 13536
LUTHERAN HOME, THE			
2825 BLOOMFIELD RD		<b>Telephone</b> (573) 335-0158	Alzheimer's Unit Yes
CAPE GIRARDEAU	MO 63703-6335	• '	
Mailing Address 2825 BLOOMFIELD R		County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63703-6335	Region 2 Medicare/Medicaid	Facility Number 13536
LUTHERAN NURSING HOME			
202 S WEST ST		<b>Telephone</b> (660) 463-2267	Alzheimer's Unit Yes
CONCORDIA	MO 64020-9643	Level of Care: SNF	Bed Capacity 113
Mailing Address PO BOX 849		County LAFAYETTE	DMH Licensed No
CONCORDIA	MO 64020-0849	Region 3 Medicare/Medicaid	Facility Number 04705
CONCORDIA	1410 04020-004)	Region 5 Medicale/Medicald	racinty Number 04/03
LUTHERAN SENIOR SERVICES AT	BREEZE PARK		
600 BREEZE PARK DR		<b>Telephone</b> (636) 939-5223	Alzheimer's Unit No
SAINT CHARLES	MO 63304-9139	Level of Care: SNF	<b>Bed Capacity</b> 81
Mailing Address 600 BREEZE PARK D		County SAINT CHARLES	DMH Licensed No
SAINT CHARLES	MO 63304-9139	Region 5 Medicare/Medicaid	Facility Number 20704
SIM (1 CIMICEES	110 033017137	Region 5 Medicare/Medicard	ruemey rumber 20704
LUTHERAN SENIOR SERVICES AT	BREEZE PARK		
600 BREEZE PARK DR		<b>Telephone</b> (636) 939-5223	Alzheimer's Unit No
SAINT CHARLES	MO 63304-9139	Level of Care: ALF	<b>Bed Capacity</b> 56
Mailing Address 600 BREEZE PARK D		County SAINT CHARLES	DMH Licensed No
SAINT CHARLES	MO 63304-9139	Region 5	Facility Number 20704
	- 0000.7107	Accepton o	
LUTHERAN SENIOR SERVICES AT	BREEZE PARK		
600 BREEZE PARK DR		<b>Telephone</b> (636) 939-5223	Alzheimer's Unit Yes
SAINT CHARLES	MO 63304-9139	Level of Care: ALF**	<b>Bed Capacity</b> 23
Mailing Address 600 BREEZE PARK D	R	County SAINT CHARLES	<b>DMH Licensed</b> No
SAINT CHARLES	MO 63304-9139	Region 5	Facility Number 20704
		~	

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LUTHERAN SENIOR SERVICES A	AT MERAMEC BLUFFS			
50 MERAMEC TRAIL DR		<b>Telephone</b> (636) 861-0600	Alzheimer's Unit	Yes
BALLWIN	MO 63021-3303	Level of Care: SNF	Bed Capacity	128
Mailing Address 50 MERAMEC TRA	AIL DR	County SAINT LOUIS COUNTY	DMH Licensed	No
BALLWIN	MO 63021-3303	Region 7 Medicare/Medicaid	Facility Number	23643
		5		
LUCHED AN GENHAR GERNIAGES	AT MED AMEC DI LIEEC			
LUTHERAN SENIOR SERVICES A	AT MERAMEC BLUFFS	T. I 1	A1 1	V
50 MERAMEC TRAIL DR	MO (2001 2202	Telephone (636) 861-0600	Alzheimer's Unit	Yes
BALLWIN	MO 63021-3303	Level of Care: ALF**	Bed Capacity	100
Mailing Address 50 MERAMEC TRA		County SAINT LOUIS COUNTY	DMH Licensed	No
BALLWIN	MO 63021-3303	Region 7	Facility Number	23643
LYNN'S HERITAGE HOUSE, INC				
800 KELLY LN		<b>Telephone</b> (573) 754-4020	Alzheimer's Unit	Yes
LOUISIANA	MO 63353-2415	Level of Care: ALF**	Bed Capacity	44
Mailing Address 800 KELLY LN		County PIKE	DMH Licensed	No
LOUISIANA	MO 63353-2415	Region 5	Facility Number	21055
MACON HEALTH CARE CENTER	R			
29612 KELLOGG AVE		<b>Telephone</b> (660) 385-5797	Alzheimer's Unit	Yes
MACON	MO 63552-3702	Level of Care: SNF	Bed Capacity	120
Mailing Address PO BOX 465		County MACON	DMH Licensed	No
MACON	MO 63552-0465	Region 5 Medicare/Medicaid	Facility Number	04914
MADISON SENIOR LIVING THE				
14001 MADISON AVENUE		<b>Telephone</b> 816-627-1726	Alzheimer's Unit	Yes
KANSAS CITY	MO 64145-1613	Level of Care: ALF**	Bed Capacity	66
Mailing Address 14001 MADISON A	VENUE	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64145-1613	Region 3	Facility Number	32321
MAGNOLIA HOUSE				
204 GRAND AVE		<b>Telephone</b> (636) 933-0662	Alzheimer's Unit	No
FESTUS	MO 63028-1842	Level of Care: RCF	Bed Capacity	12
Mailing Address 204 GRAND AVE		County JEFFERSON	DMH Licensed	Yes
FESTUS	MO 63028-1842	Region 2	Facility Number	13697
MAGNOLIA SQUARE NURSING A	AND REHAB			
1502 WEST EDGEWOOD		<b>Telephone</b> (417) 877-7545	Alzheimer's Unit	No
SPRINGFIELD	MO 65807-3567	Level of Care: SNF	Bed Capacity	120
Mailing Address 1502 WEST EDGEV	WOOD	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65807-3567	Region 1 Medicare/Medicaid	Facility Number	23400
MANOR AT ELFINDALE, THE				
1707 WEST ELFINDALE ST		<b>Telephone</b> (417) 831-2273	Alzheimer's Unit	Yes
SPRINGFIELD	MO 65807-1246	Level of Care: SNF	Bed Capacity	100
Mailing Address 1707 WEST ELFINI		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65807-1246	Region 1 Medicare	Facility Number	17371

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MANOR CROVE INCORRORATER			
MANOR GROVE, INCORPORATED	(214) 065 0064	A1 1	N.T.
711 SOUTH KIRKWOOD RD	<b>Telephone</b> (314) 965-0864	Alzheimer's Unit	No
KIRKWOOD MO 63122-5928	Level of Care: SNF	Bed Capacity	117
Mailing Address 711 SOUTH KIRKWOOD RD	County SAINT LOUIS COUNTY	DMH Licensed	No
KIRKWOOD MO 63122-5928	Region 7 Medicare/Medicaid	Facility Number	06038
MANOR, THE			
2071 BARRON RD	<b>Telephone</b> (573) 686-1147	Alzheimer's Unit	No
POPLAR BLUFF MO 63901-1903	* '		90
		Bed Capacity DMH Licensed	
Mailing Address 2071 BARRON RD	County BUTLER		No
POPLAR BLUFF MO 63901-1903	Region 2 Medicare/Medicaid	Facility Number	00683
MAPLE CREST MANOR			
430 NORTH FREDERICK STREET	<b>Telephone</b> (573) 339-7606	Alzheimer's Unit	No
CAPE GIRARDEAU MO 63701-4835	Level of Care: RCF*	Bed Capacity	48
Mailing Address 430 NORTH FREDERICK STREET	County CAPE GIRARDEAU	DMH Licensed	Yes
CAPE GIRARDEAU MO 63701-4835	Region 2	Facility Number	03628
CALL GINARDLAC MIO 03/01-4033	Region 2	racinty Number	03028
MAPLE GROVE LODGE			
2407 KENTUCKY ST	<b>Telephone</b> (573) 754-5456	Alzheimer's Unit	No
LOUISIANA MO 63353-2503	Level of Care: SNF	<b>Bed Capacity</b>	90
Mailing Address 2407 KENTUCKY ST	County PIKE	DMH Licensed	No
LOUISIANA MO 63353-2503	Region 5 Medicare/Medicaid	Facility Number	05002
		•	
MAPLE LAWN NURSING HOME			
1410 WEST LINE ST	<b>Telephone</b> (573) 769-2213	Alzheimer's Unit	No
PALMYRA MO 63461-1831	Level of Care: SNF	Bed Capacity	110
7711777			
Mailing Address PO BOX 232	County MARION	DMH Licensed	No
		DMH Licensed Facility Number	No 09961
Mailing Address PO BOX 232 PALMYRA MO 63461-0232	County MARION		
Mailing Address PO BOX 232 PALMYRA MO 63461-0232  MAPLE RIDGE RESIDENTIAL CARE CENTER LLC	County MARION  Region 5 Medicare/Medicaid	Facility Number	09961
Mailing Address PO BOX 232 PALMYRA MO 63461-0232  MAPLE RIDGE RESIDENTIAL CARE CENTER LLC 1034 DORIS DR	County MARION Region 5 Medicare/Medicaid  Telephone (573) 760-0155	Facility Number  Alzheimer's Unit	09961 No
Mailing Address PO BOX 232 PALMYRA MO 63461-0232  MAPLE RIDGE RESIDENTIAL CARE CENTER LLC 1034 DORIS DR FARMINGTON MO 63640-1954	County MARION Region 5 Medicare/Medicaid  Telephone (573) 760-0155 Level of Care: RCF*	Facility Number  Alzheimer's Unit Bed Capacity	09961 No 20
Mailing Address PO BOX 232 PALMYRA MO 63461-0232  MAPLE RIDGE RESIDENTIAL CARE CENTER LLC 1034 DORIS DR FARMINGTON MO 63640-1954 Mailing Address PO BOX 272	County MARION Region 5 Medicare/Medicaid  Telephone (573) 760-0155 Level of Care: RCF* County SAINT FRANCOIS	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	09961 No 20 Yes
Mailing Address PO BOX 232 PALMYRA MO 63461-0232  MAPLE RIDGE RESIDENTIAL CARE CENTER LLC 1034 DORIS DR FARMINGTON MO 63640-1954	County MARION Region 5 Medicare/Medicaid  Telephone (573) 760-0155 Level of Care: RCF*	Facility Number  Alzheimer's Unit Bed Capacity	09961 No 20
Mailing Address PO BOX 232 PALMYRA MO 63461-0232  MAPLE RIDGE RESIDENTIAL CARE CENTER LLC 1034 DORIS DR FARMINGTON MO 63640-1954 Mailing Address PO BOX 272	County MARION Region 5 Medicare/Medicaid  Telephone (573) 760-0155 Level of Care: RCF* County SAINT FRANCOIS	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	09961 No 20 Yes
Mailing Address PO BOX 232 PALMYRA MO 63461-0232  MAPLE RIDGE RESIDENTIAL CARE CENTER LLC 1034 DORIS DR FARMINGTON MO 63640-1954 Mailing Address PO BOX 272 FARMINGTON MO 63640-0272	County MARION Region 5 Medicare/Medicaid  Telephone (573) 760-0155 Level of Care: RCF* County SAINT FRANCOIS	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	09961 No 20 Yes
Mailing Address PO BOX 232 PALMYRA MO 63461-0232  MAPLE RIDGE RESIDENTIAL CARE CENTER LLC 1034 DORIS DR FARMINGTON MO 63640-1954 Mailing Address PO BOX 272 FARMINGTON MO 63640-0272  MAPLE SENIOR LIVING LLC	County MARION Region 5 Medicare/Medicaid  Telephone (573) 760-0155 Level of Care: RCF* County SAINT FRANCOIS Region 2	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	09961 No 20 Yes 19808
Mailing Address PO BOX 232 PALMYRA MO 63461-0232  MAPLE RIDGE RESIDENTIAL CARE CENTER LLC 1034 DORIS DR FARMINGTON MO 63640-1954 Mailing Address PO BOX 272 FARMINGTON MO 63640-0272  MAPLE SENIOR LIVING LLC 3 SOUTHWEST FIRST LANE	County MARION Region 5 Medicare/Medicaid  Telephone (573) 760-0155 Level of Care: RCF* County SAINT FRANCOIS Region 2  Telephone (417) 682-6184	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	09961 No 20 Yes 19808
Mailing Address PO BOX 232 PALMYRA MO 63461-0232  MAPLE RIDGE RESIDENTIAL CARE CENTER LLC 1034 DORIS DR FARMINGTON MO 63640-1954 Mailing Address PO BOX 272 FARMINGTON MO 63640-0272  MAPLE SENIOR LIVING LLC 3 SOUTHWEST FIRST LANE LAMAR MO 64759-8313	County MARION Region 5 Medicare/Medicaid  Telephone (573) 760-0155 Level of Care: RCF* County SAINT FRANCOIS Region 2  Telephone (417) 682-6184 Level of Care: RCF*	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	09961 No 20 Yes 19808
Mailing Address PO BOX 232 PALMYRA MO 63461-0232  MAPLE RIDGE RESIDENTIAL CARE CENTER LLC 1034 DORIS DR FARMINGTON MO 63640-1954 Mailing Address PO BOX 272 FARMINGTON MO 63640-0272  MAPLE SENIOR LIVING LLC 3 SOUTHWEST FIRST LANE LAMAR MO 64759-8313 Mailing Address 3 SOUTHWEST FIRST LANE LAMAR MO 64759-8313	County MARION Region 5 Medicare/Medicaid  Telephone (573) 760-0155 Level of Care: RCF* County SAINT FRANCOIS Region 2  Telephone (417) 682-6184 Level of Care: RCF* County BARTON Region 1	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	No 20 Yes 19808
Mailing Address PO BOX 232 PALMYRA MO 63461-0232  MAPLE RIDGE RESIDENTIAL CARE CENTER LLC 1034 DORIS DR FARMINGTON MO 63640-1954 Mailing Address PO BOX 272 FARMINGTON MO 63640-0272  MAPLE SENIOR LIVING LLC 3 SOUTHWEST FIRST LANE LAMAR MO 64759-8313  Mailing Address 3 SOUTHWEST FIRST LANE LAMAR MO 64759-8313  MAPLE TREE TERRACE - ASSISTED LIVING BY AMERICA	County MARION Region 5 Medicare/Medicaid  Telephone (573) 760-0155 Level of Care: RCF* County SAINT FRANCOIS Region 2  Telephone (417) 682-6184 Level of Care: RCF* County BARTON Region 1	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 20 Yes 19808 No 57 No 20869
Mailing Address PO BOX 232 PALMYRA MO 63461-0232  MAPLE RIDGE RESIDENTIAL CARE CENTER LLC 1034 DORIS DR FARMINGTON MO 63640-1954 Mailing Address PO BOX 272 FARMINGTON MO 63640-0272  MAPLE SENIOR LIVING LLC 3 SOUTHWEST FIRST LANE LAMAR MO 64759-8313 Mailing Address 3 SOUTHWEST FIRST LANE LAMAR MO 64759-8313  MAPLE TREE TERRACE - ASSISTED LIVING BY AMERICA 2510 CLINTON ST	County MARION Region 5 Medicare/Medicaid  Telephone (573) 760-0155 Level of Care: RCF* County SAINT FRANCOIS Region 2  Telephone (417) 682-6184 Level of Care: RCF* County BARTON Region 1	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 20 Yes 19808 No 57 No 20869
Mailing Address PO BOX 232 PALMYRA MO 63461-0232  MAPLE RIDGE RESIDENTIAL CARE CENTER LLC 1034 DORIS DR FARMINGTON MO 63640-1954 Mailing Address PO BOX 272 FARMINGTON MO 63640-0272  MAPLE SENIOR LIVING LLC 3 SOUTHWEST FIRST LANE LAMAR MO 64759-8313 Mailing Address 3 SOUTHWEST FIRST LANE LAMAR MO 64759-8313  MAPLE TREE TERRACE - ASSISTED LIVING BY AMERICA 2510 CLINTON ST CARTHAGE MO 64836-3427	County MARION Region 5 Medicare/Medicaid  Telephone (573) 760-0155 Level of Care: RCF* County SAINT FRANCOIS Region 2  Telephone (417) 682-6184 Level of Care: RCF* County BARTON Region 1  RE  Telephone (417) 358-7201 Level of Care: ALF**	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 20 Yes 19808 No 57 No 20869
Mailing Address PO BOX 232 PALMYRA MO 63461-0232  MAPLE RIDGE RESIDENTIAL CARE CENTER LLC 1034 DORIS DR FARMINGTON MO 63640-1954 Mailing Address PO BOX 272 FARMINGTON MO 63640-0272  MAPLE SENIOR LIVING LLC 3 SOUTHWEST FIRST LANE LAMAR MO 64759-8313 Mailing Address 3 SOUTHWEST FIRST LANE LAMAR MO 64759-8313  MAPLE TREE TERRACE - ASSISTED LIVING BY AMERICA 2510 CLINTON ST	County MARION Region 5 Medicare/Medicaid  Telephone (573) 760-0155 Level of Care: RCF* County SAINT FRANCOIS Region 2  Telephone (417) 682-6184 Level of Care: RCF* County BARTON Region 1	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 20 Yes 19808 No 57 No 20869

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MAPLEBROOK-ASSISTED LIVING	BY AMERICARE			
520 MAPLE VALLEY DR		<b>Telephone</b> (573) 756-2777	Alzheimer's Unit	Yes
FARMINGTON	MO 63640-1981	Level of Care: ALF**	<b>Bed Capacity</b>	61
Mailing Address 520 MAPLE VALLEY	Y DR	County SAINT FRANCOIS	DMH Licensed	No
FARMINGTON	MO 63640-1981	Region 2	Facility Number 286	535
MAPLES HEALTH AND REHABILI	TATION THE			
610 WEST SUNSET ST	1111011, 1111	<b>Telephone</b> (417) 891-1700	Alzheimer's Unit	No
SPRINGFIELD	MO 65807-3696	Level of Care: SNF		120
Mailing Address 610 WEST SUNSET S		County GREENE		No
SPRINGFIELD	MO 65807-3696	Region 1 Medicare/Medicaid	Facility Number 064	
STAIL (STEED	1.10 0000, 50,0	Region 1 Medical Contental	Tuelley Halliser	1-11
MAPLEWOOD, INC				
1827 CRADER DR		<b>Telephone</b> (573) 635-0023		No
JEFFERSON CITY	MO 65109-2005	Level of Care: ALF**	Bed Capacity	24
Mailing Address 1827 CRADER DR		County COLE		Yes
JEFFERSON CITY	MO 65109-2005	Region 6	Facility Number 169	964
MAPLEWOOD, INC				
1827 CRADER DR		<b>Telephone</b> (573) 635-0023	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-2005	Level of Care: ALF	Bed Capacity	13
Mailing Address 1827 CRADER DR		County COLE		Yes
JEFFERSON CITY	MO 65109-2005	Region 6	Facility Number 169	964
MARANATHA VILLAGE, INC		T. 1. 1. (44T) 000 004 5		
233 EAST NORTON RD	MO (5000 0600	<b>Telephone</b> (417) 833-0016		No
SPRINGFIELD	MO 65803-3633	Level of Care: RCF	Bed Capacity	29 N
Mailing Address 233 EAST NORTON		County GREENE		No
SPRINGFIELD	MO 65803-3633	Region 1	Facility Number 049	907
MARANATHA VILLAGE, INC				
233 EAST NORTON RD		<b>Telephone</b> (417) 833-0016	Alzheimer's Unit	No
SPRINGFIELD	MO 65803-3633	Level of Care: SNF	Bed Capacity 1	120
Mailing Address 233 EAST NORTON	RD	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65803-3633	Region 1 Medicare/Medicaid	Facility Number 049	907
MARI DE VILLA RETIREMENT CE	ENTER INC			
13900 CLAYTON RD	THER, INC	<b>Telephone</b> (636) 227-5347	Alzheimer's Unit	No
TOWN AND COUNTRY	MO 63017-8406	Level of Care: SNF		224
Mailing Address 13900 CLAYTON RD		County SAINT LOUIS COUNTY		No
TOWN AND COUNTRY	MO 63017-8406	Region 7		)47
15 MILE CONTRI	0.0017 0.100	Acgion /	2 acincy 1 amout 030	<i>,</i> ¬ <i>1</i>
MARIAN CLIFF RESIDENTIAL CA	RE CENTER LLC			
381 ELM ST		<b>Telephone</b> (573) 543-2218		No
SAINT MARY	MO 63673-9330	Level of Care: RCF*	Bed Capacity	66
Mailing Address PO BOX 272		County SAINTE GENEVIEVE		Yes
FARMINGTON	MO 63640-0272	Region 2	Facility Number 050	)58

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MARIES MANOR		T. 1 (770) (200 0477	
174 BALLPARK RD	MO	<b>Telephone</b> (573) 422-3177	Alzheimer's Unit No
VIENNA	MO 65582-8043	Level of Care: SNF	Bed Capacity 98
Mailing Address 174 BALLPARK RD	MO (5500 0040	County MARIES	DMH Licensed No
VIENNA	MO 65582-8043	Region 6 Medicare/Medicaid	Facility Number 10491
MARK TWAIN ASSISTED LIVING,	INC		
901 UNION AVE		<b>Telephone</b> (660) 263-6515	Alzheimer's Unit No
MOBERLY	MO 65270-2456	Level of Care: ALF**	Bed Capacity 42
Mailing Address 901 UNION AVE	110 03270 2130	County RANDOLPH	DMH Licensed No
MOBERLY	MO 65270-2456	Region 5	Facility Number 16369
		S	·
MARK TWAIN CARING CENTER			
3001 MAY ST		<b>Telephone</b> (573) 686-6999	Alzheimer's Unit Yes
POPLAR BLUFF	MO 63901-1942	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 3001 MAY ST		County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-1942	Region 2 Medicare/Medicaid	Facility Number 16013
MARK TWAIN MANOR			
11988 MARK TWAIN LN		<b>Telephone</b> (314) 291-8240	Alzheimer's Unit No
BRIDGETON	MO 63044-2825	Level of Care: SNF	Bed Capacity 120
Mailing Address 11988 MARK TWAII		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
BRIDGETON	MO 63044-2825	Region 7 Medicare/Medicaid	Facility Number 08188
MARSHFIELD CARE CENTER FOI	D DEHAR AND HEAT THCADE		
800 SOUTH WHITE OAK	K KEHAD AND HEADTHCAKE	<b>Telephone</b> (417) 859-3701	Alzheimer's Unit No
MARSHFIELD	MO 65706-2231	Level of Care: SNF	Bed Capacity 74
Mailing Address 800 SOUTH WHITE		County WEBSTER	DMH Licensed No
MARSHFIELD	MO 65706-2231	Region 1 Medicare/Medicaid	Facility Number 18481
MINGH EED	NO 03700 2231	Region 1 Wedicare/Medicard	ruemey rumber 10401
MARSHFIELD PLACE, LLC			
820 SOUTH WHITE OAK ST		<b>Telephone</b> (417) 859-3462	Alzheimer's Unit No
MARSHFIELD	MO 65706-2231	Level of Care: RCF*	Bed Capacity 40
Mailing Address 820 SOUTH WHITE	OAK ST	County WEBSTER	DMH Licensed Yes
MARSHFIELD	MO 65706-2231	Region 1	Facility Number 20500
MADY OUT VED HOME THE			
MARY CULVER HOME, THE		(214) 066 6024	
221 WEST WASHINGTON AVE	NO. 62122 2016	<b>Telephone</b> (314) 966-6034	Alzheimer's Unit No
KIRKWOOD	MO 63122-3916	Level of Care: ICF	Bed Capacity 28
Mailing Address 221 W WASHINGTO		County SAINT LOUIS COUNTY	DMH Licensed No
KIRKWOOD	MO 63122-3916	Region 7	Facility Number 00592
MARY RYDER HOME			
4361 OLIVE ST		<b>Telephone</b> (314) 531-2981	Alzheimer's Unit No
SAINT LOUIS	MO 63108-2621	Level of Care: RCF*	Bed Capacity 80
Mailing Address 4361 OLIVE ST		County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS	MO 63108-2621	Region 7	Facility Number 20972
		0 -	

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MARY, QUEEN AND MOTHER CENTER	R		
7601 WATSON RD		<b>Telephone</b> (314) 961-8000	Alzheimer's Unit NO
SHREWSBURY MC	O 63119-5001	Level of Care: SNF	Bed Capacity 230
Mailing Address 7601 WATSON RD		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SHREWSBURY MO	O 63119-5001	Region 7 Medicare/Medicaid	Facility Number 05103
MARYMOUNT MANOR			
313 AUGUSTINE RD		<b>Telephone</b> (636) 938-6770	Alzheimer's Unit YES
EUREKA	0 63025-1935	Level of Care: SNF	Bed Capacity 174
Mailing Address PO BOX 600		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
EUREKA MO	O 63025-0600	Region 7 Medicare/Medicaid	Facility Number 05117
MARYMOUNT MANOR			
313 AUGUSTINE RD		<b>Telephone</b> (636) 938-6770	Alzheimer's Unit No
EUREKA MO	O 63025-1935	Level of Care: RCF*	Bed Capacity 100
Mailing Address PO BOX 600		County SAINT LOUIS COUNTY	DMH Licensed Yes
EUREKA MO	O 63025-0600	Region 7	Facility Number 05117
		Togion .	0311,
MARY'S RANCH, INC			
ROUTE 2, BOX 2790		<b>Telephone</b> (573) 238-4253	Alzheimer's Unit No
MARBLE HILL MC	O 63764-9510	Level of Care: RCF*	<b>Bed Capacity</b> 32
Mailing Address PO BOX 589		County BOLLINGER	DMH Licensed Yes
MARBLE HILL MO	O 63764-0589	Region 2	Facility Number 08707
			•
MARYVILLE CHATEAU		T. 1 (650) 500 5445	
1101 E 5TH STREET		<b>Telephone</b> (660) 582-7447	Alzheimer's Unit No
	O 64468-1955	Level of Care: RCF	Bed Capacity 20
Mailing Address 1101 E 5TH STREET		County NODAWAY	<b>DMH Licensed</b> No
MARYVILLE MC	O 64468-1955	Region 4	Facility Number 05149
MARYVILLE LIVING CENTER			
524 NORTH LAURA		<b>Telephone</b> (660) 582-7447	Alzheimer's Unit Yes
MARYVILLE MC	O 64468-1955	Level of Care: SNF	Bed Capacity 105
Mailing Address 524 NORTH LAURA		County NODAWAY	<b>DMH Licensed</b> No
MARYVILLE MC	O 64468-1955	Region 4 Medicare/Medicaid	Facility Number 05149
MASON POINTE CARE CENTER			
13190 SOUTH OUTER 40 RD		<b>Telephone</b> (314) 434-3300	Alzheimer's Unit No
CHESTERFIELD MC	O 63017-5917	Level of Care: ALF**	<b>Bed Capacity</b> 62
Mailing Address 13190 SOUTH OUTER 40	RD	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
CHESTERFIELD MC	O 63017-5917	Region 7	Facility Number 03957
MASON POINTE CARE CENTER			
13190 SOUTH OUTER 40 RD		<b>Telephone</b> (314) 434-3300	Alzheimer's Unit No
CHESTERFIELD MC	O 63017-5917	Level of Care: SNF	<b>Bed Capacity</b> 256
Mailing Address 13190 SOUTH OUTER 40	RD	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
CHESTERFIELD MC	O 63017-5917	Region 7 Medicare/Medicaid	Facility Number 03957

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MATTIS POINTE - ASSISTED LIVING BY AMERICARE	
4962 MATTIS ROAD	Telephone (314) 328-4084 Alzheimer's Unit Ye
SAINT LOUIS MO 63128-2795	Level of Care: ALF** Bed Capacity 12
Mailing Address 4962 MATTIS ROAD	County SAINT LOUIS COUNTY DMH Licensed N
SAINT LOUIS MO 63128-2795	<b>Region</b> 7 <b>Facility Number</b> 3080
MAYWOOD MANOR	
1041 WEST TRUMAN RD	Telephone (816) 254-6789 Alzheimer's Unit No
INDEPENDENCE MO 64050-3447	Level of Care: RCF* Bed Capacity 2.
Mailing Address 1041 WEST TRUMAN RD	County JACKSON DMH Licensed Ye
INDEPENDENCE MO 64050-3447	Region 3 Facility Number 0394
INDELENDENCE INC 04030-3447	Region 5 Facinty Number 03944
MAYWOOD TERRACE LIVING CENTER	
10300 EAST TRUMAN RD	Telephone (816) 836-1250 Alzheimer's Unit Ye
INDEPENDENCE MO 64052-2258	Level of Care: SNF Bed Capacity 8
Mailing Address 10300 EAST TRUMAN RD	County JACKSON DMH Licensed N
INDEPENDENCE MO 64052-2258	<b>Region</b> 3 <b>Medicare/Medicaid Facility Number</b> 0867.
MCCLAY SENIOR CARE	
3801 MCCLAY ROAD	Telephone (636) 244-3323 Alzheimer's Unit No
SAINT PETERS MO 63376-7327	Level of Care: SNF Bed Capacity 60
Mailing Address 3801 MCCLAY ROAD	County SAINT CHARLES DMH Licensed N
SAINT PETERS MO 63376-7327	Region 5 Medicare/Medicaid Facility Number 2993:
MINITERIOR NO 03370 7327	Region 5 Medical Confederation 1 actives realised 2575.
MCCRITE PLAZA AT BRIARCLIFF ASSISTED LIVING	
1201 NW TULLISON RD	Telephone (816) 888-7930 Alzheimer's Unit Ye
KANSAS CITY MO 64116-2639	Level of Care: ALF** Bed Capacity 13:
Mailing Address 1201 NW TULLISON RD	County CLAY DMH Licensed No.
KANSAS CITY MO 64116-2639	Region 4 Facility Number 2908
MCCRITE PLAZA AT BRIARCLIFF SKILLED NURSING	
1301 TULLISON ROAD	Telephone (816) 888-7930 Alzheimer's Unit No
KANSAS CITY MO 64116-2640	Level of Care: SNF Bed Capacity 8
Mailing Address 1201 NW TULLISON ROAD	County CLAY DMH Licensed N
KANSAS CITY MO 64116-2639	Region 4 Medicare Facility Number 2908
MCDONALD BOARDING HOME	
438 NORTH 17TH ST	Telephone (816) 233-7060 Alzheimer's Unit No
SAINT JOSEPH MO 64501-2015	Level of Care: RCF Bed Capacity
Mailing Address 438 NORTH 17TH ST	·
SAINT JOSEPH MO 64501-2015	Region 4 Facility Number 05176
MCDONALD COUNTY LIVING CENTER	
1000 PATTERSON ST	<b>Telephone</b> (417) 845-3351 <b>Alzheimer's Unit</b> Ye
1000 PATTERSON ST ANDERSON MO 64831-7327	Level of Care: SNF Bed Capacity 9
1000 PATTERSON ST	

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MCKNIGHT PLACE ASSISTED LIV	ING AND MEMORY CARE			
THREE MCKNIGHT PL		<b>Telephone</b> (314) 997-5333	Alzheimer's Unit	No
SAINT LOUIS	MO 63124-1900	Level of Care: ALF**	Bed Capacity	120
Mailing Address THREE MCKNIGHT		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63124-1900	Region 7	Facility Number 2	23542
MCKNIGHT PLACE ASSISTED LIV	ING AND MEMORY CARE			
THREE MCKNIGHT PLACE	ING IND NEWYORT CHIE	<b>Telephone</b> (314) 993-3333	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63124-1900	Level of Care: SNF	Bed Capacity	55
Mailing Address THREE MCKNIGHT		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63124-1900	Region 7		23542
SAIRVI EOOB	NIO 03124 1700	Region /	racinty Number 2	23342
MCKNIGHT PLACE EXTENDED CA	ARE			
TWO MCKNIGHT PL		<b>Telephone</b> (314) 993-2221	Alzheimer's Unit	No
SAINT LOUIS	MO 63124-1900	Level of Care: SNF	Bed Capacity	70
Mailing Address TWO MCKNIGHT PL	_	County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63124-1900	Region 7 Medicare	Facility Number	18914
MCL ADNEW MANOD				
MCLARNEY MANOR 215 EAST PRATT		<b>Telephone</b> (660) 258-7402	A 1-1:!- TT:4	No
BROOKFIELD	MO 64628-1300	Telephone (660) 258-7402 Level of Care: SNF	Alzheimer's Unit	60
	WO 04028-1300		Bed Capacity DMH Licensed	No
Mailing Address PO BOX 129 BROOKFIELD	MO 64628-0129	•		
BROOKI IEED	WO 04026-0129	Region 5 Medicare/Medicaid	racinty Number (	05220
MEADOW RIDGE SENIOR LIVING				
521 MEADOW RIDGE LN		<b>Telephone</b> (660) 263-0550	Alzheimer's Unit	No
MOBERLY	MO 65270-4550	Level of Care: ALF**	Bed Capacity	57
Mailing Address 521 MEADOW RIDG	E LANE	County RANDOLPH	DMH Licensed	No
MOBERLY	MO 65270-4550	Region 5	Facility Number	28019
MEADOW VIEW OF HARRISONVII	LLE HEALTH & REHABILITATION			
2203 EAST MECHANIC ST		<b>Telephone</b> (816) 380-2622	Alzheimer's Unit	Yes
HARRISONVILLE	MO 64701-2060	Level of Care: SNF	Bed Capacity	120
Mailing Address 2203 EAST MECHAN		County CASS	DMH Licensed	No
HARRISONVILLE	MO 64701-2060	Region 3 Medicare/Medicaid		00968
MEADOWBROOK RESIDENTIAL C	CARE, INC			
806 WEST MULBERRY		<b>Telephone</b> (573) 546-7065	Alzheimer's Unit	No
PILOT KNOB	MO 63663-	Level of Care: ALF**	Bed Capacity	36
Mailing Address PO BOX 510		County IRON	DMH Licensed	No
PILOT KNOB	MO 63663-0510	Region 2	Facility Number 2	20513
MEADOWVIEW MEMORY CARE				
555 WOODLAND VILLAS LANE		<b>Telephone</b> (636) 296-1400	Alzheimer's Unit	Yes
ARNOLD	MO 63010-2011	Level of Care: ALF**	Bed Capacity	24
Mailing Address 555 WOODLAND VII		County JEFFERSON	DMH Licensed	No
ARNOLD	MO 63010-2011	Region 2		12549
	*	· o	· ··· ···-	

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MEDICALODGES BUTLER		Talankara (((0) (70 2170	Alakaisa ada Unit
103 EAST NURSERY	MO (4720 2221	<b>Telephone</b> (660) 679-3179	Alzheimer's Unit Yes
BUTLER  Mailing Address 102 EAST NUBSERV	MO 64730-2331	Level of Care: SNF	Bed Capacity 110
Mailing Address 103 EAST NURSERY	MO 64730-2331	County BATES	DMH Licensed No
BUTLER	MO 04/30-2331	Region 3 Medicare/Medicaid	Facility Number 05319
MEDICALODGES NEOSHO			
400 LYON DR		<b>Telephone</b> (417) 451-2544	Alzheimer's Unit Yes
NEOSHO	MO 64850-9194	Level of Care: SNF	Bed Capacity 114
Mailing Address 400 LYON DR		County NEWTON	<b>DMH Licensed</b> No
NEOSHO	MO 64850-9194	Region 1 Medicare/Medicaid	Facility Number 05383
MEDICALODGES NEVADA			
1210 W ASHLAND ST		<b>Telephone</b> (417) 667-5064	Alzheimer's Unit No
NEVADA	MO 64772-1906	Level of Care: SNF	Bed Capacity 100
Mailing Address 1210 W ASHLAND S	T	County VERNON	<b>DMH Licensed</b> No
NEVADA	MO 64772-1906	Region 1 Medicare/Medicaid	Facility Number 05717
MELODY HOUSE			
3031 SOUTH TEN MILE DR		<b>Telephone</b> (573) 893-7228	Alzheimer's Unit No
JEFFERSON CITY	MO 65109-6816	Level of Care: RCF*	<b>Bed Capacity</b> 15
Mailing Address 3031 S TEN MILE DE	₹	County COLE	DMH Licensed Yes
JEFFERSON CITY	MO 65109-6816	Region 6	Facility Number 14376
MERAMEC NURSING CENTER			
940 MATTOX DR		<b>Telephone</b> (573) 468-7733	Alzheimer's Unit No
SULLIVAN	MO 63080-2364	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address 940 MATTOX DR		County CRAWFORD	DMH Licensed No
SULLIVAN	MO 63080-2364	Region 6 Medicare/Medicaid	Facility Number 18277
MEYER CARE CENTER			
1201 WEST 19TH ST		<b>Telephone</b> (660) 584-4224	Alzheimer's Unit No
HIGGINSVILLE	MO 64037-1458	Level of Care: SNF	<b>Bed Capacity</b> 56
Mailing Address 1201 WEST 19TH ST	•	County LAFAYETTE	DMH Licensed No
HIGGINSVILLE	MO 64037-1458	Region 3 Medicare/Medicaid	Facility Number 05326
MEYER CARE CENTER			
1201 WEST 19TH ST		<b>Telephone</b> (660) 584-4224	Alzheimer's Unit No
HIGGINSVILLE	MO 64037-1458	Level of Care: ALF**	<b>Bed Capacity</b> 39
Mailing Address 1201 WEST 19TH ST	,	County LAFAYETTE	DMH Licensed No
HIGGINSVILLE	MO 64037-1458	<b>Region</b> 3	Facility Number 05326
MILAN HEALTH CARE CENTER			
52435 INFIRMARY RD		<b>Telephone</b> (660) 265-4032	Alzheimer's Unit No
MILAN	MO 63556-2874	Level of Care: SNF	Bed Capacity 100
Mailing Address 52435 INFIRMARY R	RD	County SULLIVAN	DMH Licensed No
2 577 4 3 7			

Medicare/Medicaid

**Facility Number** 

05418

MO 63556-2874

MILAN

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MILL CREEK VILLAGE-ASSISTEI	DLIVING BY AMERICARE	T. J. 1 (573) 201 2510		**
1990 W SOUTHAMPTON DR	140 (7200 (200	<b>Telephone</b> (573) 381-2510	Alzheimer's Unit	Yes
COLUMBIA	MO 65203-6238	Level of Care: ALF**	Bed Capacity	50
Mailing Address 1990 W SOUTHAME		County BOONE	DMH Licensed	No
COLUMBIA	MO 65203-6238	Region 6	Facility Number 3	0107
MILLER COUNTY CARE AND REF	IARILITATION CENTER			
1157 HIGHWAY 17	ENDIETITION CENTER	<b>Telephone</b> (573) 369-2318	Alzheimer's Unit	Yes
TUSCUMBIA	MO 65082-2100	Level of Care: SNF	Bed Capacity	86
Mailing Address 1157 HWY 17	WO 03002 2100	County MILLER	DMH Licensed	No
TUSCUMBIA	MO 65082-2100	Region 6 Medicare/Medicaid		5422
MILLER RESIDENT CARE, INC 210 ROCK RD		<b>Telephone</b> (660) 327-5680	Alzheimer's Unit	No
PARIS	MO 65275 1292	• '		40
	MO 65275-1282		Bed Capacity	
Mailing Address 210 ROCK RD	NO 65275 1202	County MONROE	DMH Licensed	No
PARIS	MO 65275-1282	Region 5	Facility Number 1	8026
MINER NURSING CENTER				
410 H ROAD		<b>Telephone</b> (573) 471-7683	Alzheimer's Unit	No
SIKESTON	MO 63801-5350	Level of Care: SNF	Bed Capacity	70
Mailing Address PO BOX 430		County SCOTT	DMH Licensed	No
SIKESTON	MO 63801-0430	Region 2 Medicare/Medicaid	Facility Number 1	1496
		Treateur (Arteureura		1.,,
MINGO RESIDENTIAL CARE OF P	PUXICO LLC	T. I. I. (570) 200 200 6		
24080 STATE HWY 51		<b>Telephone</b> (573) 222-3086	Alzheimer's Unit	No
PUXICO	MO 63960-8114	Level of Care: RCF*	Bed Capacity	36
Mailing Address 24080 STATE HWY		County STODDARD	DMH Licensed	Yes
PUXICO	MO 63960-8114	Region 2	Facility Number 2	4959
MOCKINGBIRD MANOR RESIDEN	VTIAL CARE			
227 W FRANKLIN		<b>Telephone</b> (816) 781-8058	Alzheimer's Unit	No
LIBERTY	MO 64068-1641	Level of Care: RCF*	Bed Capacity	16
Mailing Address PO BOX 121		County CLAY	DMH Licensed	Yes
LIBERTY	MO 64069-0121	Region 4	Facility Number 0	5450
MONITEAU CARE CENTER				
200 SOUTH GERHART		<b>Telephone</b> (573) 796-3822	Alzheimer's Unit	No
CALIFORNIA	MO 65018-2433	Level of Care: RCF*	Bed Capacity	6
Mailing Address 200 S GERHART		County MONITEAU	DMH Licensed	No
CALIFORNIA	MO 65018-2433	Region 6	Facility Number 2	0884
MONITEAU CARE CENTER				
200 SOUTH GERHART		<b>Telephone</b> (573) 796-3822	Alzheimer's Unit	No
CALIFORNIA	MO 65018-2433	Level of Care: SNF	Bed Capacity	60
Mailing Address 200 S GERHART		County MONITEAU	DMH Licensed	No
CALIFORNIA	MO 65018-2433	Region 6 Medicare/Medicaid		0884
		21001 - Miculcul Ciniculculu		

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<sup>\*</sup> Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

<sup>\*\*</sup> Licensed as an assisted living facility (ALF), is required to meet all laws, rules, and regulations applicable to an ALF and chooses to accept or retain individuals with a physical, cognitive, or other condition that prevents them from safely evacuating the facility with minimal assistance, in accordance with Section 198.073.6 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

MONROE CITY MANOR CARE CENTER   Telephome   G73) 735-4830   Alzheimer's Unit   No MONROE CITY   MO   64456-1116   Level of Care: SNF   Bed Capacity   60   Malling Address   101   11   11   12   12   13   13   14   14   14   14   14   14						
MONROE CITY	MONROE CITY MANOR CARE CENTER	R				
Mailing Address   1010   11   11   12   12   13   14   14   14   14   14   14   14	1010 HIGHWAY 24 & 36 EAST		Telephone	(573) 735-4850	Alzheimer's Unit	No
MONROE CITY	MONROE CITY MC	0 63456-1116	Level of Care:	: SNF	Bed Capacity	60
MONROF MANOR  200 SOUTH ST	Mailing Address 1010 HWY 24 & 36 EAST		County M	IARION	DMH Licensed	No
PARIS	MONROE CITY MO	0 63456-1116	Region 5	Medicare/Medicaid	Facility Number	05473
Parkis						
PARIS	MONROE MANOR					
Mailing Address 200 SOUTH ST	200 SOUTH ST		Telephone	(660) 327-4125	Alzheimer's Unit	Yes
PARIS	PARIS MC	0 65275-1165	Level of Care:	: SNF	Bed Capacity	119
MONTEREY PARK REHABILITATION & HEALTH CARE CENTER  4600 LITTLE BLUE PARKWAY  MO 64057-8302  Level of Care: SNF Bed Capacity 122  Mailing Address 4600 LITTLE BLUE PRKWY  County JACKSON DMH Licensed No  NDEPENDENCE MO 64057-8302  Region 3 Medicare/Medicaid Facility Number 15987  MONTICELLO HOUSE  1115 K LAND DR  Telephone (573) 243-8989 Alzheimer's Unit No  JACKSON MO 63755-2588  Level of Care: RCF* Bed Capacity 32  Mailing Address PO BOX 740 County CAPE GIRARDEAU DMH Licensed No  JACKSON MO 63755-2588  Level of Care: SNF Bed Capacity 14545  MONTICELLO HOUSE  1115 K LAND DR  Telephone (573) 243-8989 Alzheimer's Unit No  JACKSON MO 63755-2588  Level of Care: RCF* Bed Capacity 14545  MONTICELLO HOUSE  1115 K LAND DR  Telephone (573) 243-8989 Alzheimer's Unit No  MO 63755-2588 Level of Care: SNF Bed Capacity 105  Mailing Address PO BOX 740  Ackson MO 63755-2588 Level of Care: SNF Bed Capacity 105  Mailing Address PO BOX 740  Ackson MO 63755-0740  Region 2 Medicare/Medicaid Facility Number 14454  MOORE-FEW CARE CENTER  901 SOUTH ADAMS  NEVADA MO 64772-3209 Level of Care: SNF Bed Capacity 108  Mailing Address 901 SOUTH ADAMS  NEVADA MO 64772-3209 Level of Care: SNF Bed Capacity 108  Mailing Address 901 SOUTH ADAMS  NEVADA MO 64093-1720  MOOREVIEW RESIDENTIAL  130 WEST CULTON  MO 64093-1720  Region 1 Medicare/Medicaid Facility Number 1125  MORNINGSIDE CENTER  1700 MORNINGSIDE CR  MORNINGSIDE CENTER  1700 MORNINGSIDE CR  Telephone (660) 449-1587 Alzheimer's Unit No  MORNINGSIDE CENTER  1700 MORNINGSIDE CENTER  1700 MORNINGSIDE CR  Telephone (660) 646-0170 Alzheimer's Unit No  MORNINGSIDE CENTER  1700 M	Mailing Address 200 SOUTH ST		County M	IONROE	DMH Licensed	No
Add	PARIS MO	0 65275-1165	Region 5	Medicare/Medicaid	Facility Number	05484
Telephome   (816) 795-7888   Alzheimer's Unit   No     NOEPENDENCE   MO 64057-8302   Level of Care:   SNF   Bed Capacity   122     Monticello House   Mo 64057-8302   Region   3   Medicare/Medicaid   Facility Number   15987	MONTEDEV DADE DEHARII ITATION	& HEATTH CADE CENTED				
No		W HEALTH CARE CENTER	Telephone	(816) 795-7888	Alzheimer's Unit	No
Mailing Address 4600 LITTLE BLUE PRKWY   County   JACKSON   DMH Licensed   No   No   No   No   Action   No   No   No   No   No   No   No		64057-8302	•	` '		
No						
MONTICELLO HOUSE	· ·					
Telephome   Gr33 243-8989   Alzheimer's Unit   No     JACKSON   MO   63755-2588   Level of Care   RCF®   Bed Capacity   32     Mailing Address PO BOX 740   Region   County   CAPE GIRARDEAU   DMH Licensed   No     JACKSON   MO   63755-0740   Region   Cape   Gr33 243-8989   Alzheimer's Unit   Cape     MONTICELLO HOUSE   Telephome   Gr33 243-8989   Alzheimer's Unit   Cape     MONTICELLO HOUSE   Telephome   Gr33 243-8989   Alzheimer's Unit   Cape     JACKSON   MO   63755-2588   Level of Care   SNF   Bed Capacity   105     JACKSON   MO   63755-0740   Region   2   Medicare/Medicaid   Facility Number   14454     MOORE-FEW CARE CENTER   Grade	INDEL ENDERGE	9 04037 0302	Region 5	Medical e/Medicald	racinty rumber	13967
Telephome   Gr33 243-8989   Alzheimer's Unit   No     JACKSON   MO   63755-2588   Level of Care   RCF®   Bed Capacity   32     Mailing Address PO BOX 740   Region   County   CAPE GIRARDEAU   DMH Licensed   No     JACKSON   MO   63755-0740   Region   Cape   Gr33 243-8989   Alzheimer's Unit   Cape     MONTICELLO HOUSE   Telephome   Gr33 243-8989   Alzheimer's Unit   Cape     MONTICELLO HOUSE   Telephome   Gr33 243-8989   Alzheimer's Unit   Cape     JACKSON   MO   63755-2588   Level of Care   SNF   Bed Capacity   105     JACKSON   MO   63755-0740   Region   2   Medicare/Medicaid   Facility Number   14454     MOORE-FEW CARE CENTER   Grade	MONTICELLO HOUSE					
JACKSON	1115 K LAND DR		Telephone	(573) 243-8989	Alzheimer's Unit	No
Mailing Address PO BOX 740         County Region 2         CAPE GIR ARDEAU Facility Number         MN Licensed No Facility Number         No 1454           MONTICELLO HOUSE         I115 K LAND DR         Telephone (573) 243-8989         Alzheimer's Unit Yes Bed Capacity         105           JACKSON         MO 63755-2588         Level of Care: SNF         Bed Capacity         105           Mailing Address PO BOX 740         County CAPE GIR ARDEAU         DMH Licensed         No           MOORE-FEW CARE CENTER         901 SOUTH ADAMS         Telephone (417) 448-3841         Alzheimer's Unit No         No           NEVADA         MO 64772-3209         Level of Care: SNF         Bed Capacity         108           Mailing Address 901 SOUTH ADAMS         County VERNON         DMH Licensed         No           MOOREVIEW RESIDENTIAL         130 WEST CULTON         Telephone (660) 429-1587         Alzheimer's Unit No           WARRENSBURG         MO 64093-1720         Level of Care: RCF         Red Capacity         20           MORNINGSIDE DR         Telephone (660) 646-0170         Alzheimer's Unit	JACKSON MC	0 63755-2588	•	: RCF*		32
MONTICELLO HOUSE	Mailing Address PO BOX 740		County C.	APE GIRARDEAU		No
MONTICELLO HOUSE  1115 K LAND DR	· ·	0 63755-0740	·			14454
Telephone   (573) 243-8989   Alzheimer's Unit   Yes     JACKSON					•	
Mailing Address PO BOX 740   County   CAPE GIRARDEAU   DMH Licensed   No JACKSON   MO 63755-0740   Region 2   Medicare/Medicaid   Facility Number   14454	MONTICELLO HOUSE					
Moore-few Care Center  901 SOUTH ADAMS MO 64772-3209 Meling Address 901 SOUTH ADAMS NEVADA MOOREVIEW RESIDENTIAL  130 WEST CULTON MOREVIEW RESIDENTIAL  130 WEST CULTON Mailing Address 130 WEST CULTON Region 3 Facility Number  11225  MORNINGSIDE CENTER  1700 MORNINGSIDE CENTER  1700 MORNINGSIDE DR Telephone (660) 646-0170 Alzheimer's Unit No CHILLICOTHE MO 64601-1545 Level of Care: SNF Bed Capacity 60 Mailing Address 1700 MORNINGSIDE DR County LIVINGSTON DMH Licensed No	1115 K LAND DR		Telephone	(573) 243-8989	Alzheimer's Unit	Yes
MOORE-FEW CARE CENTER	JACKSON MC	O 63755-2588	Level of Care:	: SNF	Bed Capacity	105
MOORE-FEW CARE CENTER           901 SOUTH ADAMS         Telephone         (417) 448-3841         Alzheimer's Unit         No           NEVADA         MO 64772-3209         Level of Care:         SNF         Bed Capacity         108           Mailing Address 901 SOUTH ADAMS         County         VERNON         DMH Licensed         No           NEVADA         MO 64772-3209         Region 1         Medicare/Medicaid         Facility Number         05703           MOOREVIEW RESIDENTIAL           130 WEST CULTON         Telephone         (660) 429-1587         Alzheimer's Unit         No           WARRENSBURG         MO 64093-1720         Level of Care:         RCF         Bed Capacity         20           Mailing Address 130 WEST CULTON         County         JOHNSON         DMH Licensed         Yes           WARRENSBURG         MO 64093-1720         Region 3         Facility Number         11225           MORNINGSIDE CENTER           1700 MORNINGSIDE DR         Telephone         (660) 646-0170         Alzheimer's Unit         No           CHILLICOTHE         MO 64601-1545         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1700 MORNINGSIDE DR         County         LIVINGSTON<	Mailing Address PO BOX 740		County C.	APE GIRARDEAU	DMH Licensed	No
901 SOUTH ADAMS         Telephone         (417) 448-3841         Alzheimer's Unit         No           NEVADA         MO 64772-3209         Level of Care:         SNF         Bed Capacity         108           Mailing Address 901 SOUTH ADAMS         County         VERNON         DMH Licensed         No           NEVADA         MO 64772-3209         Region 1         Medicare/Medicaid         Facility Number         05703           MOOREVIEW RESIDENTIAL           130 WEST CULTON         Telephone         (660) 429-1587         Alzheimer's Unit         No           WARRENSBURG         MO 64093-1720         Level of Care:         RCF         Bed Capacity         20           Mailing Address 130 WEST CULTON         County         JOHNSON         DMH Licensed         Yes           WARRENSBURG         MO 64093-1720         Region 3         Facility Number         11225           MORNINGSIDE CENTER           1700 MORNINGSIDE DR         Telephone         (660) 646-0170         Alzheimer's Unit         No           CHILLICOTHE         MO 64601-1545         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1700 MORNINGSIDE DR         County         LIVINGSTON         DMH Licensed         No <td>JACKSON MC</td> <td>0 63755-0740</td> <td>Region 2</td> <td>Medicare/Medicaid</td> <td>Facility Number</td> <td>14454</td>	JACKSON MC	0 63755-0740	Region 2	Medicare/Medicaid	Facility Number	14454
901 SOUTH ADAMS         Telephone         (417) 448-3841         Alzheimer's Unit         No           NEVADA         MO 64772-3209         Level of Care:         SNF         Bed Capacity         108           Mailing Address 901 SOUTH ADAMS         County         VERNON         DMH Licensed         No           NEVADA         MO 64772-3209         Region 1         Medicare/Medicaid         Facility Number         05703           MOOREVIEW RESIDENTIAL           130 WEST CULTON         Telephone         (660) 429-1587         Alzheimer's Unit         No           WARRENSBURG         MO 64093-1720         Level of Care:         RCF         Bed Capacity         20           Mailing Address 130 WEST CULTON         County         JOHNSON         DMH Licensed         Yes           WARRENSBURG         MO 64093-1720         Region 3         Facility Number         11225           MORNINGSIDE CENTER           1700 MORNINGSIDE DR         Telephone         (660) 646-0170         Alzheimer's Unit         No           CHILLICOTHE         MO 64601-1545         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1700 MORNINGSIDE DR         County         LIVINGSTON         DMH Licensed         No <td>MOODE FEW CADE CENTED</td> <td></td> <td></td> <td></td> <td></td> <td></td>	MOODE FEW CADE CENTED					
NEVADA         MO 64772-3209         Level of Care:         SNF         Bed Capacity         108           Mailing Address 901 SOUTH ADAMS         County         VERNON         DMH Licensed         No           NEVADA         MO 64772-3209         Region 1         Medicare/Medicaid         Facility Number         05703           MOOREVIEW RESIDENTIAL         130 WEST CULTON         Telephone         (660) 429-1587         Alzheimer's Unit         No           WARRENSBURG         MO 64093-1720         Level of Care:         RCF         Bed Capacity         20           Mailing Address 130 WEST CULTON         County         JOHNSON         DMH Licensed         Yes           WARRENSBURG         MO 64093-1720         Region 3         Facility Number         11225           MORNINGSIDE CENTER           1700 MORNINGSIDE DR         Telephone         (660) 646-0170         Alzheimer's Unit         No           CHILLICOTHE         MO 64601-1545         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1700 MORNINGSIDE DR         County         LIVINGSTON         DMH Licensed         No			Telephone	(417) 448-3841	Alzheimer's Unit	No
Mailing Address 901 SOUTH ADAMS         County         VERNON         DMH Licensed         No           NEVADA         MO 64772-3209         Region 1         Medicare/Medicaid         Facility Number         05703           MOOREVIEW RESIDENTIAL           130 WEST CULTON         Telephone         (660) 429-1587         Alzheimer's Unit         No           WARRENSBURG         MO 64093-1720         Level of Care:         RCF         Bed Capacity         20           Mailing Address 130 WEST CULTON         County         JOHNSON         DMH Licensed         Yes           WARRENSBURG         MO 64093-1720         Region 3         Facility Number         11225           MORNINGSIDE CENTER           1700 MORNINGSIDE DR         Telephone         (660) 646-0170         Alzheimer's Unit         No           CHILLICOTHE         MO 64601-1545         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1700 MORNINGSIDE DR         County         LIVINGSTON         DMH Licensed         No		0 64772-3209	•	* *		
MO OREVIEW RESIDENTIAL         Telephone         (660) 429-1587         Alzheimer's Unit         No           WARRENSBURG         MO 64093-1720         Level of Care:         RCF         Bed Capacity         20           Mailing Address 130 WEST CULTON         County         JOHNSON         DMH Licensed         Yes           WARRENSBURG         MO 64093-1720         Region 3         Facility Number         11225           MORNINGSIDE CENTER         Telephone         (660) 646-0170         Alzheimer's Unit         No           1700 MORNINGSIDE DR         Telephone         (660) 646-0170         Alzheimer's Unit         No           CHILLICOTHE         MO 64601-1545         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1700 MORNINGSIDE DR         County         LIVINGSTON         DMH Licensed         No		04112-3207				
MOOREVIEW RESIDENTIAL           130 WEST CULTON         Telephone         (660) 429-1587         Alzheimer's Unit         No           WARRENSBURG         MO 64093-1720         Level of Care:         RCF         Bed Capacity         20           Mailing Address 130 WEST CULTON         County         JOHNSON         DMH Licensed         Yes           WARRENSBURG         MO 64093-1720         Region 3         Facility Number         11225           MORNINGSIDE CENTER           1700 MORNINGSIDE DR         Telephone         (660) 646-0170         Alzheimer's Unit         No           CHILLICOTHE         MO 64601-1545         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1700 MORNINGSIDE DR         County         LIVINGSTON         DMH Licensed         No	· ·	64772-3209				
Telephone         (660) 429-1587         Alzheimer's Unit         No           WARRENSBURG         MO 64093-1720         Level of Care:         RCF         Bed Capacity         20           Mailing Address 130 WEST CULTON         County         JOHNSON         DMH Licensed         Yes           WARRENSBURG         MO 64093-1720         Region 3         Facility Number         11225           MORNINGSIDE CENTER           1700 MORNINGSIDE DR         Telephone         (660) 646-0170         Alzheimer's Unit         No           CHILLICOTHE         MO 64601-1545         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1700 MORNINGSIDE DR         County         LIVINGSTON         DMH Licensed         No	NEVADA MC	7 04772-3207	Region 1	Medical e/Medicald	racinty Number	03703
Telephone         (660) 429-1587         Alzheimer's Unit         No           WARRENSBURG         MO 64093-1720         Level of Care:         RCF         Bed Capacity         20           Mailing Address 130 WEST CULTON         County         JOHNSON         DMH Licensed         Yes           WARRENSBURG         MO 64093-1720         Region 3         Facility Number         11225           MORNINGSIDE CENTER           1700 MORNINGSIDE DR         Telephone         (660) 646-0170         Alzheimer's Unit         No           CHILLICOTHE         MO 64601-1545         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1700 MORNINGSIDE DR         County         LIVINGSTON         DMH Licensed         No	MOOREVIEW RESIDENTIAL					
WARRENSBURG         MO 64093-1720         Level of Care:         RCF         Bed Capacity         20           Mailing Address 130 WEST CULTON         County         JOHNSON         DMH Licensed         Yes           WARRENSBURG         MO 64093-1720         Region 3         Facility Number         11225           MORNINGSIDE CENTER           1700 MORNINGSIDE DR         Telephone         (660) 646-0170         Alzheimer's Unit         No           CHILLICOTHE         MO 64601-1545         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1700 MORNINGSIDE DR         County         LIVINGSTON         DMH Licensed         No			Telephone	(660) 429-1587	Alzheimer's Unit	No
Mailing Address 130 WEST CULTON       County       JOHNSON       DMH Licensed       Yes         WARRENSBURG       MO 64093-1720       Region 3       Facility Number       11225         MORNINGSIDE CENTER         1700 MORNINGSIDE DR       Telephone       (660) 646-0170       Alzheimer's Unit       No         CHILLICOTHE       MO 64601-1545       Level of Care:       SNF       Bed Capacity       60         Mailing Address 1700 MORNINGSIDE DR       County       LIVINGSTON       DMH Licensed       No	WARRENSBURG MC	0 64093-1720	-	: RCF	Bed Capacity	20
WARRENSBURG         MO 64093-1720         Region 3         Facility Number         11225           MORNINGSIDE CENTER           1700 MORNINGSIDE DR         Telephone (660) 646-0170         Alzheimer's Unit         No           CHILLICOTHE         MO 64601-1545         Level of Care: SNF         Bed Capacity         60           Mailing Address 1700 MORNINGSIDE DR         County         LIVINGSTON         DMH Licensed         No	Mailing Address 130 WEST CULTON		County JC	OHNSON		Yes
MORNINGSIDE CENTER           1700 MORNINGSIDE DR         Telephone         (660) 646-0170         Alzheimer's Unit         No           CHILLICOTHE         MO 64601-1545         Level of Care:         SNF         Bed Capacity         60           Mailing Address 1700 MORNINGSIDE DR         County         LIVINGSTON         DMH Licensed         No	· ·	O 64093-1720	·		Facility Number	11225
1700 MORNINGSIDE DRTelephone(660) 646-0170Alzheimer's UnitNoCHILLICOTHEMO 64601-1545Level of Care:SNFBed Capacity60Mailing Address 1700 MORNINGSIDE DRCountyLIVINGSTONDMH LicensedNo			Ü		<del>-</del>	
CHILLICOTHE MO 64601-1545 Level of Care: SNF Bed Capacity 60  Mailing Address 1700 MORNINGSIDE DR County LIVINGSTON DMH Licensed No	MORNINGSIDE CENTER					
Mailing Address         1700 MORNINGSIDE DR         County         LIVINGSTON         DMH Licensed         No	1700 MORNINGSIDE DR		Telephone	(660) 646-0170	Alzheimer's Unit	No
·	CHILLICOTHE MC	O 64601-1545	Level of Care:	: SNF	Bed Capacity	60
CHILLICOTHE MO 64601-1545 Region 4 Medicare/Medicaid Facility Number 05557	_		County Ll	IVINGSTON		No
	CHILLICOTHE MC	0 64601-1545	Region 4	Medicare/Medicaid	Facility Number	05557

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<sup>\*</sup> Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

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MORNINGSIDE CENTER ASSISTEI	LIVING APARTMENTS			
1702 MORNINGSIDE DR		<b>Telephone</b> (660) 646-0170	Alzheimer's Unit	No
CHILLICOTHE	MO 64601-1545	Level of Care: ALF		31
Mailing Address 1702 MORNINGSIDE		County LIVINGSTON		No 
CHILLICOTHE	MO 64601-1545	Region 4	Facility Number 0555	57
MOTHER OF GOOD COUNSEL HO	ME			
6825 NATURAL BRIDGE RD		<b>Telephone</b> (314) 383-4765	Alzheimer's Unit N	No
SAINT LOUIS	MO 63121-5314	Level of Care: SNF	Bed Capacity 11	14
Mailing Address 6825 NATURAL BRII		County SAINT LOUIS COUNTY	= :	No
SAINT LOUIS	MO 63121-5314	•		
SAINT LOUIS	MO 03121-3314	Region 7	Facility Number 0556	58
MOTHER OF PERPETUAL HELP R	ESIDENCE, INC			
7609 WATSON ROAD		<b>Telephone</b> (314) 918-2260	Alzheimer's Unit Yo	es
SAINT LOUIS	MO 63119-5001	Level of Care: ALF**	Bed Capacity 16	60
Mailing Address 7609 WATSON RD		County SAINT LOUIS COUNTY		No
SAINT LOUIS	MO 63119-5001	Region 7	Facility Number 2111	
SAIR LOOKS	MO 03117 3001	Kegion /	Tacinty Number 2111	11
MOUNT CARMEL SENIOR LIVING	- ST CHARLES, LLC			
723 FIRST CAPITOL DR		<b>Telephone</b> (636) 946-4140	Alzheimer's Unit	Vо
SAINT CHARLES	MO 63301-2729	Level of Care: SNF	Bed Capacity 11	10
Mailing Address 723 FIRST CAPITOL	DR	County SAINT CHARLES	DMH Licensed N	No
SAINT CHARLES	MO 63301-2729	Region 5 Medicare/Medicaid	Facility Number 0756	60
			•	
MOUNTAIN VIEW HEALTHCARE				
1211 NORTH ASH ST		<b>Telephone</b> (417) 934-6818		No
MOUNTAIN VIEW	MO 65548-7376	Level of Care: SNF	Bed Capacity 10	05
Mailing Address PO BOX 879		County HOWELL	DMH Licensed	Vо
MOUNTAIN VIEW	MO 65548-0879	Region 1 Medicare/Medicaid	Facility Number 1554	42
MS B'S BLESSINGS				
4739 COTE BRILLIANTE AVE		<b>Telephone</b> (314) 533-1922	Alzheimer's Unit	No
SAINT LOUIS	MO 63113-1813	Level of Care: RCF		6
Mailing Address 4739 COTE BRILLIA		County SAINT LOUIS CITY		es
•		•		
SAINT LOUIS	MO 63113-1813	Region 7	Facility Number 1088	59
MT VERNON PLACE CARE CENTE	CR, INC			
1425 SOUTH LANDRUM		<b>Telephone</b> (417) 466-2260	Alzheimer's Unit	Vо
MT VERNON	MO 65712-1912	Level of Care: SNF	Bed Capacity 6	60
Mailing Address 1425 S LANDRUM		County LAWRENCE	DMH Licensed N	No
MT VERNON	MO 65712-1912	Region 1 Medicare/Medicaid	Facility Number 1630	04
		area e/Azeareana		
MY PLACE RESIDENTIAL CARE, L	C.	(CO.C.) 000 4700		
23 NORTH SIXTH ST	NO (2000 122)	<b>Telephone</b> (636) 933-1793		No 4.4
FESTUS	MO 63028-1301	Level of Care: ALF		44
Mailing Address 23 NORTH SIXTH ST		County JEFFERSON		es
FESTUS	MO 63028-1301	Region 2	Facility Number 1063	31

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<sup>\*</sup> Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (93rd General Assembly, Second Regular Session (2006)).

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MY PLACE TOO, INC				
1107 CLARKE ST		<b>Telephone</b> (636) 586-7871	Alzheimer's Unit	No
DE SOTO	MO 63020-2709	Level of Care: RCF*	Bed Capacity	50
Mailing Address 1107 CLARKE ST		County JEFFERSON	DMH Licensed	Yes
DE SOTO	MO 63020-2709	Region 2	Facility Number	16234
MYERS NURSING & CONVALESC	ENT CENTER			
2315 WALROND AVE		<b>Telephone</b> (816) 231-3180	Alzheimer's Unit	No
KANSAS CITY	MO 64127-4210	Level of Care: ICF	Bed Capacity	84
Mailing Address 2315 WALROND AV		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64127-4210	Region 3 Medicaid	Facility Number	05626
NATION DIGNADO HEALTH GAD	E CENTRED			
NATHAN RICHARD HEALTH CAR 700 EAST HIGHLAND AVE	E CENTER	Tolonhone (417) 667 9990	Alahaimanta Unit	No
NEVADA	MO 64772 1025	Telephone (417) 667-8889 Level of Care: SNF	Alzheimer's Unit Bed Capacity	No 68
	MO 64772-1025		DMH Licensed	No
Mailing Address 700 EAST HIGHLAN NEVADA	MO 64772-1025	·		
NEVADA	WO 04/72-1023	Region 1 Medicare/Medicaid	Facility Number	18210
NAZARETH LIVING CENTER				
2 NAZARETH LN		<b>Telephone</b> (314) 487-3950	Alzheimer's Unit	No
SAINT LOUIS	MO 63129-7600	Level of Care: SNF	Bed Capacity	121
Mailing Address 2 NAZARETH LN		County SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63129-7600	Region 7 Medicare/Medicaid	Facility Number	17458
		g		
NAZARETH LIVING CENTER				
2 NAZARETH LN		<b>Telephone</b> (314) 487-3950	Alzheimer's Unit	Yes
SAINT LOUIS	MO 63129-7600	Level of Care: ALF**	Bed Capacity	114
Mailing Address 2 NAZARETH LN		<b>County</b> SAINT LOUIS COUNTY	DMH Licensed	No
SAINT LOUIS	MO 63129-7600	Region 7	Facility Number	17458
NEIGHBORHOODS AT OUAT CR				
NEIGHBORHOODS AT QUAIL CRI 1514 WEST LARK	EEK, THE	<b>Telephone</b> (417) 889-1275	Alzheimer's Unit	Yes
SPRINGFIELD	MO 65810-2270	Level of Care: SNF	Bed Capacity	120
Mailing Address 1514 WEST LARK	WIO 03010-2270	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65810-2270	Region 1 Medicare/Medicaid	Facility Number	24701
SI KEVGI IEED	WO 03010 2270	Region 1 Wedicale/Medicalu	Tacinty (valide)	24701
NEIGHBORHOODS REHABILITAT	TION & SKILLED NURSING BY TIGE	CRPLACE, THE		
3003 FALLING LEAF COURT		<b>Telephone</b> (573) 256-4620	Alzheimer's Unit	No
COLUMBIA	MO 65201-3549	Level of Care: SNF	Bed Capacity	120
Mailing Address 3003 FALLING LEAD	FCOURT	County BOONE	DMH Licensed	No
COLUMBIA	MO 65201-3549	Region 6 Medicare/Medicaid	Facility Number	24341
NEW HAVEN CARE CENTER				
NEW HAVEN CARE CENTER 9503 HIGHWAY 100		<b>Telephone</b> (573) 237-2103	Alzheimer's Unit	No
NEW HAVEN	MO 63068-1300	Level of Care: SNF	Bed Capacity	90
Mailing Address 9503 HWY 100	110 03000-1300	County FRANKLIN	DMH Licensed	No
NEW HAVEN	MO 63068-1300	·	Facility Number	05738
TIEW HAVEN	1410 03000-1300	Region 6 Medicare/Medicaid	racinty Number	05130

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NEW HAVEN CARE CENTER		T. I. (572) 227 2122	41.1 1.77.4
9503 HIGHWAY 100	MO (2000 1200	<b>Telephone</b> (573) 237-2103	Alzheimer's Unit No
NEW HAVEN	MO 63068-1300	Level of Care: ALF County FRANKLIN	Bed Capacity 16
Mailing Address 9503 HWY 100	MO 63068-1300		DMH Licensed No Facility Number 05738
NEW HAVEN	MO 03008-1300	Region 6	Facility Number 05738
NEW HAVEN LIVING CENTER			
609 GOLF ST		<b>Telephone</b> (816) 230-7530	Alzheimer's Unit No
ODESSA	MO 64076-1462	Level of Care: SNF	Bed Capacity 60
Mailing Address 609 GOLF ST		County LAFAYETTE	DMH Licensed No
ODESSA	MO 64076-1462	Region 3 Medicare/Medicaid	Facility Number 05749
NEW HODIZONG DGE H			
NEW HORIZONS RCF II 5858 BUSIEK ROAD		Tolonhous (572) 756 2426	Algheimenta IInit No
FARMINGTON	MO 63640-7325	Telephone (573) 756-2426 Level of Care: ALF	Alzheimer's Unit No Bed Capacity 15
Mailing Address PO BOX 510	MO 03040-7323	County SAINT FRANCOIS	DMH Licensed Yes
FARMINGTON	MO 63640-0510	Region 2	Facility Number 14868
TARWINGTON	WO 03040-0310	Region 2	racinty Number 14000
NEW MADRID LIVING CENTER			
1050 DAWSON RD		<b>Telephone</b> (573) 748-5622	Alzheimer's Unit Yes
NEW MADRID	MO 63869-1116	Level of Care: SNF	Bed Capacity 112
Mailing Address 1050 DAWSON RD		County NEW MADRID	DMH Licensed No
NEW MADRID	MO 63869-1116	Region 2 Medicare/Medicaid	<b>Facility Number</b> 04952
NEW MARK CARE CENTER			
11221 NORTH NASHUA DR		<b>Telephone</b> (816) 734-4433	Alzheimer's Unit Yes
KANSAS CITY	MO 64155-1159	Level of Care: SNF	Bed Capacity 199
Mailing Address 11221 N NASHUA E		County CLAY	DMH Licensed No
KANSAS CITY	MO 64155-1159	Region 4 Medicare/Medicaid	Facility Number 12688
NEWSTEAD PLACE			
19 NORTH NEWSTEAD		<b>Telephone</b> (314) 286-4510	Alzheimer's Unit No
SAINT LOUIS	MO 63108-2260	Level of Care: RCF*	Bed Capacity 20
Mailing Address 19 N NEWSTEAD		County SAINT LOUIS CITY	<b>DMH Licensed</b> Yes
SAINT LOUIS	MO 63108-2260	Region 7	Facility Number 19169
MIIGHEAL THOARE DEGLOCE			
NHC HEALTHCARE, DESLOGE 801 BRIM ST		<b>Telephone</b> (573) 431-0223	Alzheimer's Unit Yes
DESLOGE	MO 63601-3441	•	
Mailing Address PO BOX AA	1410 03001-3441	Level of Care: SNF County SAINT FRANCOIS	Bed Capacity 120 DMH Licensed No
DESLOGE	MO 63601-0568	Region 2 Medicare/Medicaid	Facility Number 02143
DESECOL	05001-0500	Acgion 2 Medicare/Medicald	1 acmty (143)
NHC HEALTHCARE, JOPLIN			
2700 EAST 34TH ST		<b>Telephone</b> (417) 781-1737	Alzheimer's Unit No
JOPLIN	MO 64804-4310	Level of Care: SNF	<b>Bed Capacity</b> 126
Mailing Address PO BOX 2877		County NEWTON	DMH Licensed No
JOPLIN	MO 64803-2877	Region 1 Medicare/Medicaid	Facility Number 04044

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NHC HEALTHCARE, KENNETT			
1120 FALCON	NO 50077 0007	<b>Telephone</b> (573) 888-1150	Alzheimer's Unit Yes
KENNETT	MO 63857-3825	Level of Care: SNF	Bed Capacity 170
Mailing Address PO BOX 696	140 50055 0505	County DUNKLIN	DMH Licensed No
KENNETT	MO 63857-0696	Region 2 Medicare/Medicaid	Facility Number 04268
NHC HEALTHCARE, MARYLAND	HEIGHTS		
2920 FEE FEE RD		<b>Telephone</b> (314) 291-0121	Alzheimer's Unit Yes
MARYLAND HEIGHTS	MO 63043-1915	Level of Care: SNF	Bed Capacity 220
Mailing Address 2920 FEE FEE RD		County SAINT LOUIS COUNTY	DMH Licensed No
MARYLAND HEIGHTS	MO 63043-1915	Region 7 Medicare/Medicaid	Facility Number 08272
NAME AND A STREET OF STREET OF THE STREET			
NHC HEALTHCARE, ST CHARLES	•	T. I. I. (626) 046 9997	A11 ' 17''
35 SUGAR MAPLE LN	MO 62202 5740	<b>Telephone</b> (636) 946-8887	Alzheimer's Unit No
SAINT CHARLES	MO 63303-5740	Level of Care: SNF	Bed Capacity 120
Mailing Address 35 SUGAR MAPLE I		County SAINT CHARLES	DMH Licensed No
SAINT CHARLES	MO 63303-5740	Region 5 Medicare/Medicaid	Facility Number 07503
NHC HEALTHCARE, WEST PLAIN	IS		
211 DAVIS DR		<b>Telephone</b> (417) 256-0798	Alzheimer's Unit Yes
WEST PLAINS	MO 65775-2242	Level of Care: SNF	Bed Capacity 114
Mailing Address PO BOX 497		County HOWELL	DMH Licensed No
WEST PLAINS	MO 65775-0497	Region 1 Medicare/Medicaid	Facility Number 08434
NICK'S HEALTH CARE CENTER, I	LLC		
253 EAST HIGHWAY 116		<b>Telephone</b> (816) 539-2376	Alzheimer's Unit No
PLATTSBURG	MO 64477-1561	Level of Care: SNF	Bed Capacity 70
Mailing Address 253 EAST HWY 116		County CLINTON	<b>DMH Licensed</b> No
PLATTSBURG	MO 64477-1561	Region 4 Medicare/Medicaid	Facility Number 22058
NIXA NURSING & REHAB			
1104 NORTH MAIN ST		<b>Telephone</b> (417) 725-1777	Alzheimer's Unit No
NIXA	MO 65714-9316	Level of Care: SNF	Bed Capacity 82
Mailing Address 1104 N MAIN ST	333 007119010	County CHRISTIAN	DMH Licensed No
NIXA	MO 65714-9316	Region 1 Medicare/Medicaid	Facility Number 13840
NODAWAY NURSING HOME			
22371 STATE HIGHWAY 46		<b>Telephone</b> (660) 562-2876	Alzheimer's Unit No
MARYVILLE	MO 64468-8157	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address PO BOX 307		County NODAWAY	<b>DMH Licensed</b> No
MARYVILLE	MO 64468-0307	Region 4 Medicare/Medicaid	Facility Number 05766
NORMANDY NURSING CENTER			
7301 SAINT CHARLES ROCK RD		<b>Telephone</b> (314) 862-0555	Alzheimer's Unit No
SAINT LOUIS	MO 63133-1737	Level of Care: SNF	Bed Capacity 116
Mailing Address 7301 SAINT CHARL	ES ROCK RD	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63133-1737	Region 7 Medicare/Medicaid	Facility Number 01118
			•

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NORTERRE			
2580 NORTERRE CIRCLE		<b>Telephone</b> (816) 479-4793	Alzheimer's Unit Yes
LIBERTY	MO 64068-3412	Level of Care: ALF**	Bed Capacity 60
Mailing Address 2580 NORTERRE CI		County CLAY	DMH Licensed No
LIBERTY	MO 64068-3412	Region 4	Facility Number 31005
		Region	
NORTERRE			
2555 NORTERRE CIRCLE		<b>Telephone</b> (816) 479-4793	Alzheimer's Unit No
LIBERTY	MO 64068-3313	Level of Care: SNF	Bed Capacity 60
Mailing Address 2555 NORTERRE CI		County CLAY	DMH Licensed No
LIBERTY	MO 64086-3313	Region 4 Medicare/Medicaid	Facility Number 31005
NORTH VILLAGE PARK			
2041 SILVA LN		<b>Telephone</b> (660) 269-7300	Alzheimer's Unit No
MOBERLY	MO 65270-3658	Level of Care: SNF	Bed Capacity 184
Mailing Address 2041 SILVA LN		County RANDOLPH	DMH Licensed No
MOBERLY	MO 65270-3658	Region 5 Medicare/Medicaid	Facility Number 06481
NORTHLAND REHABILITATION	& HEALTH CARE CENTER		
4301 NE PARVIN ROAD		<b>Telephone</b> (816) 702-8000	Alzheimer's Unit No
KANSAS CITY	MO 64117-3001	Level of Care: SNF	Bed Capacity 118
Mailing Address 4301 NE PARVIN RO	OAD	County CLAY	DMH Licensed No.
KANSAS CITY	MO 64117-3001	Region 4 Medicare/Medicaid	Facility Number 31230
NODEN DE LE CONTROL DE LE CONT			
NORTHPARK VILLAGE - ASSISTE	D LIVING BY AMERICARE	T. I. I. (417) 591 2200	A11.
4449 N STATE HIGHWAY NN	MO (5721 7221	<b>Telephone</b> (417) 581-3200	Alzheimer's Unit No
OZARK	MO 65721-7221	Level of Care: ALF**	Bed Capacity 52
Mailing Address 4449 N STATE HIGH OZARK		County CHRISTIAN	DMH Licensed No
UZAKK	MO 65721-7221	Region 1	Facility Number 20003
NORTHRIDGE PLACE - ASSISTED	LIVING BY AMERICARE		
1500 LYNN ST		<b>Telephone</b> (417) 532-9793	Alzheimer's Unit Yes
LEBANON	MO 65536-4409	Level of Care: ALF**	Bed Capacity 50
Mailing Address 1500 LYNN ST		County LACLEDE	DMH Licensed No
LEBANON	MO 65536-4409	Region 1	Facility Number 20525
NORTHVIEW VILLAGE			
2415 NORTH KINGSHIGHWAY		<b>Telephone</b> (314) 361-1300	Alzheimer's Unit No
SAINT LOUIS	MO 63113-1109	Level of Care: SNF	Bed Capacity 320
Mailing Address 2415 NORTH KINGS	SHIGHWAY	County SAINT LOUIS CITY	DMH Licensed No
SAINT LOUIS	MO 63113-1109	Region 7 Medicare/Medicaid	Facility Number 08058
NORTHWOOD HILLS CARE CENT	TER		
800 NORTH ARTHUR ST	NO (55/21.05/25	<b>Telephone</b> (417) 754-2208	Alzheimer's Unit Yes
HUMANSVILLE	MO 65674-8655	Level of Care: SNF	Bed Capacity 120
Mailing Address PO BOX 187	NO (5/71 0107	County POLK	DMH Licensed No
HUMANSVILLE	MO 65674-0187	Region 1 Medicare/Medicaid	Facility Number 10607

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0.14. 00.045 14.00000 0.00000			
OAK GROVE NURSING & REHAB		T-l (916) 600 4119	Al-haimanta Tinia Van
2108 SOUTH MITCHELL OAK GROVE	MO 64075-9472	Telephone (816) 690-4118 Level of Care: SNF	Alzheimer's Unit Yes Bed Capacity 90
Mailing Address 2108 S MITCHELL	WIO 04073-9472	County JACKSON	Bed Capacity 90 DMH Licensed No
OAK GROVE	MO 64075-9472	Region 3 Medicare/Medicaid	Facility Number 05849
OAK GROVE	1410 04073-7472	Region 3 Medical e/Medicald	racinty Number 03649
OAK KNOLL SKILLED NURSING &	& REHABILITATION CENTER		
37 N CLARK AVE		<b>Telephone</b> (314) 521-7419	Alzheimer's Unit No
FERGUSON	MO 63135-2323	Level of Care: SNF	<b>Bed Capacity</b> 72
Mailing Address 37 N CLARK AVE		County SAINT LOUIS COUNTY	DMH Licensed No
FERGUSON	MO 63135-2323	Region 7 Medicare/Medicaid	Facility Number 05864
OAK DADK CADE CENTED			
OAK PARK CARE CENTER 6637 BERTHOLD AVE		<b>Telephone</b> (314) 781-3444	Alzheimer's Unit No
SAINT LOUIS	MO 63139-3318	Level of Care: SNF	Bed Capacity 120
Mailing Address 6637 BERTHOLD AV		County SAINT LOUIS CITY	DMH Licensed No
SAINT LOUIS	MO 63139-3318	Region 7 Medicare/Medicaid	Facility Number 05914
SAINI LOUIS	WO 03137-3316	Region / Medicare/Medicaid	racinty Number 03914
OAK POINTE OF CARTHAGE			
300 W AIRPORT DR		<b>Telephone</b> (417) 358-3355	Alzheimer's Unit Yes
CARTHAGE	MO 64836-3511	Level of Care: ALF**	<b>Bed Capacity</b> 55
Mailing Address 300 W AIRPORT DR		County JASPER	DMH Licensed No
CARTHAGE	MO 64836-3511	Region 1	Facility Number 30168
OAK POINTE OF KEARNEY			
200 MEADOWBROOK DR		<b>Telephone</b> (816) 628-0075	Alzheimer's Unit Yes
KEARNEY	MO 64060-8788	Level of Care: ALF**	Bed Capacity 55
Mailing Address 200 MEADOWBROO		County CLAY	DMH Licensed No
KEARNEY	MO 64060-8788	Region 4	Facility Number 29803
OAK POINTE OF MARYVILLE			
817 SOUTH COUNTRY CLUB DR		<b>Telephone</b> (660) 562-2799	Alzheimer's Unit Yes
MARYVILLE	MO 64468-1477	Level of Care: ALF**	<b>Bed Capacity</b> 55
Mailing Address 817 SOUTH COUNT	RY CLUB DR	County NODAWAY	<b>DMH Licensed</b> No
MARYVILLE	MO 64468-1477	Region 4	Facility Number 29544
OAK POINTE OF MONETT			
1011 OLD AIRPORT ROAD		<b>Telephone</b> (417) 235-3500	Alzheimer's Unit Yes
MONETT	MO 65708-1375	Level of Care: ALF**	Bed Capacity 55
Mailing Address 1011 OLD AIRPORT		County LAWRENCE	DMH Licensed No
MONETT	MO 65708-1375	Region 1	Facility Number 30206
A STATE OF THE STA	05/00 15/5	avgion i	2 minute 30200
OAK POINTE OF NEOSHO			
2601 OAK RIDGE EXTENSION		<b>Telephone</b> (417) 451-8872	Alzheimer's Unit Yes
NEOSHO	MO 64850-7765	Level of Care: ALF**	<b>Bed Capacity</b> 55
Mailing Address 2601 OAK RIDGE EX		County NEWTON	<b>DMH Licensed</b> No
NEOSHO	MO 64850-7765	Region 1	Facility Number 29972

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OAK POINTE OF ROLLA				
1000 EAST LIONS CLUB DRIVE		<b>Telephone</b> (573) 426-2186	Alzheimer's Unit	Yes
ROLLA	MO 65401-4356	Level of Care: ALF**	Bed Capacity	65
Mailing Address 1000 EAST LIONS CI		County PHELPS	DMH Licensed	No
ROLLA	MO 65401-4356	Region 6	Facility Number	31216
OAK POINTE OF WARRENTON				
700 FORREST AVE		<b>Telephone</b> (636) 456-6464	Alzheimer's Unit	Yes
WARRENTON	MO 63383-7040	Level of Care: ALF**		71
	WO 03383-7040	County WARREN	Bed Capacity DMH Licensed	No
Mailing Address 700 FORREST AVE WARRENTON	MO 63383-7040	·		
WARRENTON	WIO 03363-7040	Region 6	Facility Number	25045
OAK POINTE OF WASHINGTON				
1650 HIGH STREET		<b>Telephone</b> (636) 390-3290	Alzheimer's Unit	YES
WASHINGTON	MO 63090-4354	Level of Care: ALF**	Bed Capacity	65
Mailing Address 1650 HIGH STREET		County FRANKLIN	DMH Licensed	No
WASHINGTON	MO 63090-4354	Region 6	Facility Number	32114
OAK RIDGE ASSISTED LIVING				
403 CRISPIN ST		<b>Telephone</b> (816) 776-3435	Alzheimer's Unit	Yes
RICHMOND	MO 64085-1212	Level of Care: ALF**	Bed Capacity	55
Mailing Address 403 CRISPIN ST		County RAY	DMH Licensed	No
RICHMOND	MO 64085-1212	Region 4	Facility Number	29711
OAKDALE CARE CENTER				
OAKDALE CARE CENTER		T-1	A 1-1	NI.
2702 DEBBIE LN	MO 62001 2650	Telephone (573) 686-5242 Level of Care: SNF	Alzheimer's Unit	No 70
POPLAR BLUFF	MO 63901-2650		Bed Capacity DMH Licensed	70 No
			Dividi Lacensed	
Mailing Address 2702 DEBBIE LN	MO 62001 2650	•		
POPLAR BLUFF	MO 63901-2650	Region 2 Medicare/Medicaid	Facility Number	18157
•	MO 63901-2650	•		
POPLAR BLUFF	MO 63901-2650	•		
POPLAR BLUFF  OAKDALE CARE CENTER	MO 63901-2650 MO 63901-2650	Region 2 Medicare/Medicaid	Facility Number	18157
POPLAR BLUFF  OAKDALE CARE CENTER  2702 DEBBIE LN  POPLAR BLUFF		Region 2 Medicare/Medicaid  Telephone (573) 686-5242	Facility Number  Alzheimer's Unit	18157 No
POPLAR BLUFF  OAKDALE CARE CENTER  2702 DEBBIE LN		Region 2 Medicare/Medicaid  Telephone (573) 686-5242 Level of Care: RCF*	Facility Number  Alzheimer's Unit  Bed Capacity	18157 No 36
POPLAR BLUFF  OAKDALE CARE CENTER  2702 DEBBIE LN  POPLAR BLUFF  Mailing Address 2702 DEBBIE LN	MO 63901-2650	Region 2 Medicare/Medicaid  Telephone (573) 686-5242 Level of Care: RCF* County BUTLER	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	18157 No 36 Yes
POPLAR BLUFF  OAKDALE CARE CENTER  2702 DEBBIE LN  POPLAR BLUFF  Mailing Address 2702 DEBBIE LN	MO 63901-2650	Region 2 Medicare/Medicaid  Telephone (573) 686-5242 Level of Care: RCF* County BUTLER	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	18157 No 36 Yes
POPLAR BLUFF  OAKDALE CARE CENTER  2702 DEBBIE LN  POPLAR BLUFF  Mailing Address 2702 DEBBIE LN  POPLAR BLUFF	MO 63901-2650	Region 2 Medicare/Medicaid  Telephone (573) 686-5242 Level of Care: RCF* County BUTLER Region 2  Telephone (573) 686-5242	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	18157 No 36 Yes
POPLAR BLUFF  OAKDALE CARE CENTER  2702 DEBBIE LN  POPLAR BLUFF  Mailing Address 2702 DEBBIE LN  POPLAR BLUFF  OAKDALE CARE CENTER	MO 63901-2650	Region 2 Medicare/Medicaid  Telephone (573) 686-5242 Level of Care: RCF* County BUTLER Region 2	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 36 Yes 18157
POPLAR BLUFF  OAKDALE CARE CENTER  2702 DEBBIE LN  POPLAR BLUFF  Mailing Address 2702 DEBBIE LN  POPLAR BLUFF  OAKDALE CARE CENTER  2702 DEBBIE LN	MO 63901-2650 MO 63901-2650	Region 2 Medicare/Medicaid  Telephone (573) 686-5242 Level of Care: RCF* County BUTLER Region 2  Telephone (573) 686-5242	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 36 Yes 18157
POPLAR BLUFF  OAKDALE CARE CENTER  2702 DEBBIE LN  POPLAR BLUFF  Mailing Address 2702 DEBBIE LN  POPLAR BLUFF  OAKDALE CARE CENTER  2702 DEBBIE LN  POPLAR BLUFF	MO 63901-2650 MO 63901-2650	Region 2 Medicare/Medicaid  Telephone (573) 686-5242 Level of Care: RCF* County BUTLER Region 2  Telephone (573) 686-5242 Level of Care: ALF	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	No 36 Yes 18157
OAKDALE CARE CENTER 2702 DEBBIE LN POPLAR BLUFF Mailing Address 2702 DEBBIE LN POPLAR BLUFF  OAKDALE CARE CENTER 2702 DEBBIE LN POPLAR BLUFF Mailing Address 2702 DEBBIE LN POPLAR BLUFF	MO 63901-2650 MO 63901-2650 MO 63901-2650	Region 2 Medicare/Medicaid  Telephone (573) 686-5242 Level of Care: RCF* County BUTLER Region 2  Telephone (573) 686-5242 Level of Care: ALF County BUTLER	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	No 36 Yes 18157 No 60 No
OAKDALE CARE CENTER 2702 DEBBIE LN POPLAR BLUFF Mailing Address 2702 DEBBIE LN POPLAR BLUFF  OAKDALE CARE CENTER 2702 DEBBIE LN POPLAR BLUFF Mailing Address 2702 DEBBIE LN POPLAR BLUFF Mailing Address 2702 DEBBIE LN POPLAR BLUFF	MO 63901-2650 MO 63901-2650 MO 63901-2650	Region 2 Medicare/Medicaid  Telephone (573) 686-5242 Level of Care: RCF* County BUTLER Region 2  Telephone (573) 686-5242 Level of Care: ALF County BUTLER Region 2	Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 36 Yes 18157 No 60 No 18157
OAKDALE CARE CENTER 2702 DEBBIE LN POPLAR BLUFF Mailing Address 2702 DEBBIE LN POPLAR BLUFF  OAKDALE CARE CENTER 2702 DEBBIE LN POPLAR BLUFF Mailing Address 2702 DEBBIE LN POPLAR BLUFF Mailing Address 2702 DEBBIE LN POPLAR BLUFF OAKRIDGE OF PLATTSBURG 205 EAST CLAY AVE	MO 63901-2650 MO 63901-2650 MO 63901-2650 MO 63901-2650	Region 2 Medicare/Medicaid  Telephone (573) 686-5242 Level of Care: RCF* County BUTLER Region 2  Telephone (573) 686-5242 Level of Care: ALF County BUTLER Region 2  Telephone (816) 539-2128	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 36 Yes 18157 No 60 No 18157
POPLAR BLUFF  OAKDALE CARE CENTER 2702 DEBBIE LN POPLAR BLUFF  Mailing Address 2702 DEBBIE LN POPLAR BLUFF  OAKDALE CARE CENTER 2702 DEBBIE LN POPLAR BLUFF  Mailing Address 2702 DEBBIE LN POPLAR BLUFF  Mailing Address 2702 DEBBIE LN POPLAR BLUFF  OAKRIDGE OF PLATTSBURG 205 EAST CLAY AVE PLATTSBURG	MO 63901-2650 MO 63901-2650 MO 63901-2650	Region 2 Medicare/Medicaid  Telephone (573) 686-5242 Level of Care: RCF* County BUTLER Region 2  Telephone (573) 686-5242 Level of Care: ALF County BUTLER Region 2  Telephone (816) 539-2128 Level of Care: SNF	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 36 Yes 18157  No 60 No 18157
OAKDALE CARE CENTER 2702 DEBBIE LN POPLAR BLUFF Mailing Address 2702 DEBBIE LN POPLAR BLUFF  OAKDALE CARE CENTER 2702 DEBBIE LN POPLAR BLUFF Mailing Address 2702 DEBBIE LN POPLAR BLUFF Mailing Address 2702 DEBBIE LN POPLAR BLUFF OAKRIDGE OF PLATTSBURG 205 EAST CLAY AVE	MO 63901-2650 MO 63901-2650 MO 63901-2650 MO 63901-2650	Region 2 Medicare/Medicaid  Telephone (573) 686-5242 Level of Care: RCF* County BUTLER Region 2  Telephone (573) 686-5242 Level of Care: ALF County BUTLER Region 2  Telephone (816) 539-2128	Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 36 Yes 18157 No 60 No 18157

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OAKS COTTAGE ASSISTED LIVING 5448 N 2ND AVENUE	G, THE	<b>Telephone</b> (417) 581-0330	Alzheimer's Unit	Yes
OZARK	MO 65721-6210	Level of Care: ALF**	Bed Capacity	12
Mailing Address 5448 N 2ND AVENUI		County CHRISTIAN	DMH Licensed	No
OZARK	MO 65721-6210	Region 1		31804
OLAKK	WO 03/21-0210	Kegion 1	racinty Number	1004
OAKS, THE				
5550 NOLAND ROAD		<b>Telephone</b> (816) 356-0200	Alzheimer's Unit	No
KANSAS CITY	MO 64133-3685	Level of Care: RCF	Bed Capacity	62
Mailing Address 5550 NOLAND RD		County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64122 2695			
KANSAS CII I	MO 64133-3685	Region 3	Facility Number	13440
OAKWOOD ESTATES NURSING &	REHAB			
5303 BERMUDA DR		<b>Telephone</b> (314) 385-0910	Alzheimer's Unit	Yes
NORMANDY	MO 63121-1407	Level of Care: SNF	Bed Capacity	115
Mailing Address 5303 BERMUDA DR		County SAINT LOUIS COUNTY	DMH Licensed	No
NORMANDY	MO 63121-1407	Region 7 Medicare/Medicaid		01238
NORWANDI	WO 03121-1407	Region / Medicare/Medicald	racinty Number	)1236
OASIS RESIDENTIAL CARE FACIL	ITY			
3508 PRAIRIE AVE		<b>Telephone</b> (314) 534-3355	Alzheimer's Unit	No
SAINT LOUIS	MO 63107-2214	Level of Care: RCF*	Bed Capacity	20
Mailing Address 3508 PRAIRIE AVE		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63107-2214	Region 7		15415
SARVI ECCES	NIO 03107 2214	Region /	racinty Number	13413
OREGON CARE CENTER				
501 MONROE		<b>Telephone</b> (660) 446-3355	Alzheimer's Unit	No
OREGON	MO 64473-7800	Level of Care: SNF	Bed Capacity	60
Mailing Address PO BOX 19		County HOLT	DMH Licensed	No
OREGON	MO 64473-0019	Region 4 Medicare/Medicaid	Facility Number (	06097
ORILLA'S WAY				
1209 SOUTH HIGH ST		<b>Telephone</b> (660) 564-2204	Alzheimer's Unit	No
	MO (4456 0056	• '		
GRANT CITY	MO 64456-0056		Bed Capacity	37
Mailing Address PO BOX 56		County WORTH	DMH Licensed	No
GRANT CITY	MO 64456-0056	Region 4	Facility Number (	)8591
OSAGE BEACH REHABILITATION	AND HEALTH CARE CENTER			
844 PASSOVER RD		<b>Telephone</b> (573) 348-2225	Alzheimer's Unit	No
OSAGE BEACH	MO 65065-2834	Level of Care: SNF	Bed Capacity	94
Mailing Address 844 PASSOVER RD		County CAMDEN	DMH Licensed	No
•	MO 65065 2924	•		
OSAGE BEACH	MO 65065-2834	Region 6 Medicare/Medicaid	Facility Number (	06116
OUR LADY OF MERCY COUNTRY	номе			
2160 MERCY DR		<b>Telephone</b> (816) 781-5711	Alzheimer's Unit	No
LIBERTY	MO 64068-7955	Level of Care: RCF*	<b>Bed Capacity</b>	44
Mailing Address 2160 MERCY DR		County CLAY	DMH Licensed	No
LIBERTY	MO 64068-7955	Region 4		)6153
	· · · · · · ·	8		

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OWEN ACRES RESIDENTIAL CAI	RE FACILITY			
614 COUNTY ROAD 466		<b>Telephone</b> (573) 778-0497	Alzheimer's Unit	No
POPLAR BLUFF	MO 63901-2964	Level of Care: RCF	<b>Bed Capacity</b>	20
Mailing Address 614 COUNTY RD 4	66	County BUTLER	DMH Licensed	Yes
POPLAR BLUFF	MO 63901-2964	Region 2	Facility Number	21093
OXFORD GRAND AT SHOAL CRE	FK			
8280 N TULLIS AVENUE	EK	<b>Telephone</b> (816) 781-8282	Alzheimer's Unit	Yes
KANSAS CITY	MO 64158-7683	Level of Care: ALF**	Bed Capacity	98
Mailing Address 8280 N TULLIS AVI		County CLAY	DMH Licensed	No
KANSAS CITY	MO 64158-7683	Region 4	Facility Number	30758
KANSAS CITT	WO 04136-7003	Region +	racinty Number	30736
OZARK MANOR				
1013 HIGHWAY Z		<b>Telephone</b> (573) 783-8338	Alzheimer's Unit	No
FREDERICKTOWN	MO 63645-8035	Level of Care: ALF**	Bed Capacity	55
Mailing Address 1013 HIGHWAY Z		County MADISON	DMH Licensed	No
FREDERICKTOWN	MO 63645-8035	Region 2	Facility Number	22947
OZARK NURSING & CARE CENTI	ER			
1486 NORTH RIVERSIDE RD		<b>Telephone</b> (417) 581-7126	Alzheimer's Unit	No
OZARK	MO 65721-7688	Level of Care: SNF	Bed Capacity	120
Mailing Address 1486 NORTH RIVE	RSIDE RD	County CHRISTIAN	DMH Licensed	No
OZARK	MO 65721-7688	Region 1 Medicare/Medicaid	Facility Number	06240
OZARK OAKS RESIDENTIAL CAR				
OZAKK OAKS KESIDENTIAL CAI	RE FACILITY II			
3405 S SCHIFFERDECKER	RE FACILITY II	<b>Telephone</b> (417) 347-7760	Alzheimer's Unit	No
	MO 64804-1388	<b>Telephone</b> (417) 347-7760 <b>Level of Care:</b> RCF*	Alzheimer's Unit Bed Capacity	No 30
3405 S SCHIFFERDECKER		• '		
3405 S SCHIFFERDECKER JOPLIN		Level of Care: RCF*	<b>Bed Capacity</b>	30
3405 S SCHIFFERDECKER JOPLIN <b>Mailing Address</b> PO BOX 2526	MO 64804-1388	Level of Care: RCF* County NEWTON	Bed Capacity DMH Licensed	30 Yes
3405 S SCHIFFERDECKER JOPLIN <b>Mailing Address</b> PO BOX 2526 JOPLIN	MO 64804-1388 MO 64803-2526	Level of Care: RCF* County NEWTON	Bed Capacity DMH Licensed	30 Yes
3405 S SCHIFFERDECKER JOPLIN <b>Mailing Address</b> PO BOX 2526	MO 64804-1388 MO 64803-2526	Level of Care: RCF* County NEWTON	Bed Capacity DMH Licensed	30 Yes
3405 S SCHIFFERDECKER JOPLIN Mailing Address PO BOX 2526 JOPLIN OZARK REHABILITATION & HEA	MO 64804-1388 MO 64803-2526	Level of Care: RCF* County NEWTON Region 1	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	30 Yes 13636
3405 S SCHIFFERDECKER JOPLIN Mailing Address PO BOX 2526 JOPLIN  OZARK REHABILITATION & HEA 1083 OZARK CARE DR	MO 64804-1388  MO 64803-2526  ALTH CARE CENTER	Level of Care: RCF* County NEWTON Region 1  Telephone (573) 348-1711	Bed Capacity DMH Licensed Facility Number	30 Yes 13636 No
3405 S SCHIFFERDECKER JOPLIN Mailing Address PO BOX 2526 JOPLIN  OZARK REHABILITATION & HEA 1083 OZARK CARE DR OSAGE BEACH	MO 64804-1388  MO 64803-2526  ALTH CARE CENTER	Level of Care: RCF* County NEWTON Region 1  Telephone (573) 348-1711 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	30 Yes 13636 No 60
3405 S SCHIFFERDECKER JOPLIN Mailing Address PO BOX 2526 JOPLIN  OZARK REHABILITATION & HEA 1083 OZARK CARE DR OSAGE BEACH Mailing Address PO BOX 270	MO 64804-1388  MO 64803-2526  ALTH CARE CENTER  MO 65065-3016	Level of Care: RCF* County NEWTON Region 1  Telephone (573) 348-1711 Level of Care: SNF County CAMDEN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	30 Yes 13636 No 60 No
3405 S SCHIFFERDECKER JOPLIN Mailing Address PO BOX 2526 JOPLIN  OZARK REHABILITATION & HEA 1083 OZARK CARE DR OSAGE BEACH Mailing Address PO BOX 270 OSAGE BEACH	MO 64804-1388  MO 64803-2526  ALTH CARE CENTER  MO 65065-3016	Level of Care: RCF* County NEWTON Region 1  Telephone (573) 348-1711 Level of Care: SNF County CAMDEN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	30 Yes 13636 No 60 No
3405 S SCHIFFERDECKER JOPLIN Mailing Address PO BOX 2526 JOPLIN  OZARK REHABILITATION & HEA 1083 OZARK CARE DR OSAGE BEACH Mailing Address PO BOX 270 OSAGE BEACH  OZARK RIVERVIEW MANOR	MO 64804-1388  MO 64803-2526  ALTH CARE CENTER  MO 65065-3016	Level of Care: RCF* County NEWTON Region 1  Telephone (573) 348-1711 Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	30 Yes 13636 No 60 No 06217
3405 S SCHIFFERDECKER JOPLIN Mailing Address PO BOX 2526 JOPLIN  OZARK REHABILITATION & HEA 1083 OZARK CARE DR OSAGE BEACH Mailing Address PO BOX 270 OSAGE BEACH  OZARK RIVERVIEW MANOR 1200 WEST HALL ST	MO 64804-1388  MO 64803-2526  ALTH CARE CENTER  MO 65065-3016  MO 65065-0270	Level of Care: RCF* County NEWTON Region 1  Telephone (573) 348-1711 Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (417) 581-6025	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	30 Yes 13636 No 60 No 06217
3405 S SCHIFFERDECKER JOPLIN Mailing Address PO BOX 2526 JOPLIN  OZARK REHABILITATION & HEA 1083 OZARK CARE DR OSAGE BEACH Mailing Address PO BOX 270 OSAGE BEACH  OZARK RIVERVIEW MANOR 1200 WEST HALL ST OZARK	MO 64804-1388  MO 64803-2526  ALTH CARE CENTER  MO 65065-3016	Level of Care: RCF* County NEWTON Region 1  Telephone (573) 348-1711 Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (417) 581-6025 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	30 Yes 13636 No 60 No 06217
3405 S SCHIFFERDECKER JOPLIN Mailing Address PO BOX 2526 JOPLIN  OZARK REHABILITATION & HEA 1083 OZARK CARE DR OSAGE BEACH Mailing Address PO BOX 270 OSAGE BEACH  OZARK RIVERVIEW MANOR 1200 WEST HALL ST OZARK Mailing Address PO BOX 157	MO 64804-1388  MO 64803-2526  ALTH CARE CENTER  MO 65065-3016  MO 65065-0270  MO 65721-9103	Level of Care: RCF* County NEWTON Region 1  Telephone (573) 348-1711 Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (417) 581-6025 Level of Care: SNF County CHRISTIAN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	30 Yes 13636 No 60 No 06217
3405 S SCHIFFERDECKER JOPLIN Mailing Address PO BOX 2526 JOPLIN  OZARK REHABILITATION & HEA 1083 OZARK CARE DR OSAGE BEACH Mailing Address PO BOX 270 OSAGE BEACH  OZARK RIVERVIEW MANOR 1200 WEST HALL ST OZARK	MO 64804-1388  MO 64803-2526  ALTH CARE CENTER  MO 65065-3016  MO 65065-0270	Level of Care: RCF* County NEWTON Region 1  Telephone (573) 348-1711 Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (417) 581-6025 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	30 Yes 13636 No 60 No 06217
3405 S SCHIFFERDECKER JOPLIN  Mailing Address PO BOX 2526 JOPLIN  OZARK REHABILITATION & HEA 1083 OZARK CARE DR OSAGE BEACH  Mailing Address PO BOX 270 OSAGE BEACH  OZARK RIVERVIEW MANOR 1200 WEST HALL ST OZARK  Mailing Address PO BOX 157 OZARK	MO 64804-1388  MO 64803-2526  ALTH CARE CENTER  MO 65065-3016  MO 65065-0270  MO 65721-9103  MO 65721-0157	Level of Care: RCF* County NEWTON Region 1  Telephone (573) 348-1711 Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (417) 581-6025 Level of Care: SNF County CHRISTIAN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	30 Yes 13636 No 60 No 06217
3405 S SCHIFFERDECKER JOPLIN Mailing Address PO BOX 2526 JOPLIN  OZARK REHABILITATION & HEA 1083 OZARK CARE DR OSAGE BEACH Mailing Address PO BOX 270 OSAGE BEACH  OZARK RIVERVIEW MANOR 1200 WEST HALL ST OZARK Mailing Address PO BOX 157 OZARK  OZARKS METHODIST MANOR, T	MO 64804-1388  MO 64803-2526  ALTH CARE CENTER  MO 65065-3016  MO 65065-0270  MO 65721-9103  MO 65721-0157	Level of Care: RCF* County NEWTON Region 1  Telephone (573) 348-1711 Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (417) 581-6025 Level of Care: SNF County CHRISTIAN Region 1 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	30 Yes 13636 No 60 No 06217 No 90 No 01426
3405 S SCHIFFERDECKER JOPLIN  Mailing Address PO BOX 2526 JOPLIN  OZARK REHABILITATION & HEA 1083 OZARK CARE DR OSAGE BEACH  Mailing Address PO BOX 270 OSAGE BEACH  OZARK RIVERVIEW MANOR 1200 WEST HALL ST OZARK  Mailing Address PO BOX 157 OZARK  OZARKS METHODIST MANOR, T 205 SOUTH COLLEGE	MO 64804-1388  MO 64803-2526  ALTH CARE CENTER  MO 65065-3016  MO 65065-0270  MO 65721-9103  MO 65721-0157  HE	Level of Care: RCF* County NEWTON Region 1  Telephone (573) 348-1711 Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (417) 581-6025 Level of Care: SNF County CHRISTIAN Region 1 Medicare/Medicaid  Telephone (417) 258-2573	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	30 Yes 13636 No 60 No 06217 No 90 No 01426
3405 S SCHIFFERDECKER JOPLIN  Mailing Address PO BOX 2526 JOPLIN  OZARK REHABILITATION & HEA 1083 OZARK CARE DR OSAGE BEACH  Mailing Address PO BOX 270 OSAGE BEACH  OZARK RIVERVIEW MANOR 1200 WEST HALL ST OZARK  Mailing Address PO BOX 157 OZARK  OZARK  OZARKS METHODIST MANOR, T 205 SOUTH COLLEGE MARIONVILLE	MO 64804-1388  MO 64803-2526  ALTH CARE CENTER  MO 65065-3016  MO 65065-0270  MO 65721-9103  MO 65721-0157	Level of Care: RCF* County NEWTON Region 1  Telephone (573) 348-1711 Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (417) 581-6025 Level of Care: SNF County CHRISTIAN Region 1 Medicare/Medicaid  Telephone (417) 258-2573 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	30 Yes 13636 No 60 No 06217 No 90 No 01426
3405 S SCHIFFERDECKER JOPLIN  Mailing Address PO BOX 2526 JOPLIN  OZARK REHABILITATION & HEA 1083 OZARK CARE DR OSAGE BEACH  Mailing Address PO BOX 270 OSAGE BEACH  OZARK RIVERVIEW MANOR 1200 WEST HALL ST OZARK  Mailing Address PO BOX 157 OZARK  OZARKS METHODIST MANOR, T 205 SOUTH COLLEGE	MO 64804-1388  MO 64803-2526  ALTH CARE CENTER  MO 65065-3016  MO 65065-0270  MO 65721-9103  MO 65721-0157  HE	Level of Care: RCF* County NEWTON Region 1  Telephone (573) 348-1711 Level of Care: SNF County CAMDEN Region 6 Medicare/Medicaid  Telephone (417) 581-6025 Level of Care: SNF County CHRISTIAN Region 1 Medicare/Medicaid  Telephone (417) 258-2573	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	30 Yes 13636 No 60 No 06217 No 90 No 01426

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OZARKS METHODIST MANOR, TH	TE.		
205 SOUTH COLLEGE		<b>Telephone</b> (417) 258-2573	Alzheimer's Unit No
MARIONVILLE	MO 65705-9340	Level of Care: RCF	Bed Capacity 76
Mailing Address PO BOX 403	3.55 36,06 35.10	County LAWRENCE	DMH Licensed No
MARIONVILLE	MO 65705-0403	Region 1	Facility Number 06273
WING WELL	120 03703 0103	Region 1	ruemey rumser 00275
PACIFIC CARE CENTER			
105 SOUTH SIXTH ST		<b>Telephone</b> (636) 271-4222	Alzheimer's Unit No
PACIFIC	MO 63069-1328	Level of Care: SNF	Bed Capacity 120
Mailing Address 105 S SIXTH ST		County FRANKLIN	DMH Licensed No
PACIFIC	MO 63069-1328	Region 6 Medicare/Medicaid	Facility Number 12638
PACIFIC CARE CENTER			
105 SOUTH SIXTH ST		<b>Telephone</b> (636) 271-4222	Alzheimer's Unit No
PACIFIC	MO 63069-1328	Level of Care: ALF**	Bed Capacity 16
Mailing Address 105 S SIXTH ST	1410 03007 1320	County FRANKLIN	DMH Licensed No
PACIFIC	MO 63069-1328	Region 6	Facility Number 12638
Melik	1320	Kegion 0	racinty (value)
PARC PROVENCE			
605 COEUR DE VILLE DR		<b>Telephone</b> (314) 542-2500	<b>Alzheimer's Unit</b> Yes
SAINT LOUIS	MO 63141-6603	Level of Care: SNF	Bed Capacity 140
Mailing Address 605 COEUR DE VILI		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63141-6603	Region 7	Facility Number 24122
PARK PLACE			
2004 BOARDWALK PLACE DR		<b>Telephone</b> (636) 625-2900	<b>Alzheimer's Unit</b> Yes
O'FALLON	MO 63368-3900	Level of Care: ALF**	Bed Capacity 44
Mailing Address 2004 BOARDWALK	PLACE DR	County SAINT CHARLES	<b>DMH Licensed</b> No
O'FALLON	MO 63368-3900	Region 5	Facility Number 25379
PARK PLACE APARTMENTS			
1211 NORTH ASH ST		<b>Telephone</b> (417) 934-6818	Alzheimer's Unit No
MOUNTAIN VIEW	MO 65548-7376	Level of Care: ALF	Bed Capacity 18
Mailing Address PO BOX 879		County HOWELL	DMH Licensed No
MOUNTAIN VIEW	MO 65548-0879	Region 1	Facility Number 15542
DADK DI ACE II			
PARK PLACE II 2000 BOARDWALK PLACE DR		<b>Telephone</b> (636) 695-4360	Alzheimer's Unit No
O'FALLON	MO 63368-3901	Telephone (636) 695-4360 Level of Care: ALF**	Bed Capacity 80
Mailing Address 2000 BOARDWALK O'FALLON	MO 63368-3901	County SAINT CHARLES  Pagion 5	
OTALLON	10,5009-3,011	Region 5	Facility Number 29016
PARKDALE MANOR CARE CENTE	R		
814 WEST SOUTH AVE		<b>Telephone</b> (660) 582-8161	Alzheimer's Unit No
MARYVILLE	MO 64468-2772	Level of Care: SNF	<b>Bed Capacity</b> 86
Mailing Address 814 W SOUTH AVE		County NODAWAY	<b>DMH Licensed</b> No
MARYVILLE	MO 64468-2772	Region 4 Medicare/Medicaid	Facility Number 06308

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PARKLANE CARE AND REHABILIT	CATION CENTER		
401 MAR-LE DR		<b>Telephone</b> (636) 332-9580	Alzheimer's Unit Yes
WENTZVILLE	MO 63385-1647	Level of Care: SNF	<b>Bed Capacity</b> 240
Mailing Address 401 MAR-LE DR		County SAINT CHARLES	<b>DMH Licensed</b> No
WENTZVILLE	MO 63385-1647	Region 5 Medicare/Medicaid	Facility Number 04883
PARKSIDE MANOR			
1201 HUNT AVE		<b>Telephone</b> (573) 449-1448	Alzheimer's Unit Yes
COLUMBIA	MO 65202-1367	Level of Care: SNF	Bed Capacity 120
Mailing Address 1201 HUNT AVE	10 03202-1307	County BOONE	DMH Licensed No
COLUMBIA	MO 65202-1367	Region 6 Medicare/Medicaid	Facility Number 11262
			•
PARKSIDE MANOR, LLC			
300 S SAINT CHARLES ST		<b>Telephone</b> (573) 324-9918	Alzheimer's Unit NO
BOWLING GREEN	MO 63334-2221	Level of Care: ALF**	Bed Capacity 44
Mailing Address 300 S SAINT CHARLE	ES ST	County PIKE	<b>DMH Licensed</b> No
BOWLING GREEN	MO 63334-2221	Region 5	Facility Number 05511
PARKSIDE-ASSISTED LIVING BY A	MERICARE		
2100 PARKSIDE AVE	250 55404 5450	<b>Telephone</b> (573) 308-0834	Alzheimer's Unit NO
ROLLA	MO 65401-5472	Level of Care: ALF**	Bed Capacity 28
Mailing Address 2100 PARKSIDE AVE		County PHELPS	DMH Licensed No
ROLLA	MO 65401-5472	Region 6	Facility Number 31191
PARKVIEW HEALTH CARE FACILI	TY		
119 WEST FOREST		<b>Telephone</b> (417) 326-3000	Alzheimer's Unit Yes
BOLIVAR	MO 65613-1316	Level of Care: SNF	<b>Bed Capacity</b> 78
Mailing Address 119 WEST FOREST		County POLK	DMH Licensed No
BOLIVAR	MO 65613-1316	Region 1 Medicare/Medicaid	Facility Number 17638
PARKVIEW HEALTHCARE			
128 NORTH HARDESTY		<b>Telephone</b> (816) 241-2020	Alzheimer's Unit No
KANSAS CITY	MO 64123-1404	Level of Care: SNF	Bed Capacity 120
Mailing Address 128 NORTH HARDES	TY	County JACKSON	<b>DMH Licensed</b> No
KANSAS CITY	MO 64123-1404	Region 3 Medicare/Medicaid	Facility Number 02928
PARKWAY HEALTH CARE CENTEI	2		
2323 SWOPE PARKWAY		<b>Telephone</b> (816) 924-1122	Alzheimer's Unit No
KANSAS CITY	MO 64130-2638	Level of Care: SNF	Bed Capacity 97
Mailing Address 2323 SWOPE PARKW		County JACKSON	DMH Licensed No
KANSAS CITY	MO 64130-2638		Facility Number 07092
M HOUD CIT I	1120 UT13U-2U3U	Region 3 Medicare/Medicaid	racinty running 0/092
PARKWAY SENIOR LIVING, THE			
550 NE NAPOLEON DR		<b>Telephone</b> (816) 228-8866	Alzheimer's Unit Yes
BLUE SPRINGS	MO 64014-5403	Level of Care: ALF**	<b>Bed Capacity</b> 72
Mailing Address 550 NE NAPOLEON D	DR .	County JACKSON	<b>DMH Licensed</b> No
BLUE SPRINGS	MO 64014-5403	Region 3	Facility Number 29917

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PARKWOOD MANOR  325 NORTH SPRIGG ST  CAPE GIRARDEAU  MO 63701-5531  Level of Care: RCF  Bed Capacity  Mailing Address 325 NORTH SPRIGG ST  County  CAPE GIRARDEAU  DMH Licensed	
CAPE GIRARDEAU MO 63701-5531 Level of Care: RCF Bed Capacity	N.T.
	No
Maning Address 323 NORTH SPRIOUST	10 No
CAPE GIRARDEAU MO 63701-5531 <b>Region</b> 2 <b>Facility Number</b>	06291
CAFE GIRARDEAU MO 03/01-3331 Region 2 Facility Number	00291
PARKWOOD MANOR	
325 NORTH SPRIGG ST Telephone (573) 334-7011 Alzheimer's Unit	No
CAPE GIRARDEAU MO 63701-5531 Level of Care: RCF* Bed Capacity	20
Mailing Address 325 N SPRIGG ST County CAPE GIRARDEAU DMH Licensed	Yes
CAPE GIRARDEAU MO 63701-5531 Region 2 Facility Number	06291
PARKWOOD MEADOWS - ASSISTED LIVING BY AMERICARE	
805 PARKWOOD DR Telephone (573) 883-3883 Alzheimer's Unit	Yes
SAINTE GENEVIEVE MO 63670-1858 Level of Care: ALF** Bed Capacity	66
Mailing Address 805 PARKWOOD DR  County SAINTE GENEVIEVE DMH Licensed	No
SAINTE GENEVIEVE MO 63670-1858 Region 2 Facility Number	23234
PARKWOOD SKILLED NURSING AND REHABILITATION CENTER	
3201 PARKWOOD LN Telephone (314) 291-5911 Alzheimer's Unit	No
MARYLAND HEIGHTS MO 63043-1334 Level of Care: SNF Bed Capacity	130
Mailing Address         3201 PARKWOOD LN         County         SAINT LOUIS COUNTY         DMH Licensed	No
MARYLAND HEIGHTS MO 63043-1334 Region 7 Medicare/Medicaid Facility Number	02471
PATHWAYS PROGRAM, THE	
161 PIEPER RD Telephone (636) 978-3132 Alzheimer's Unit	No
O'FALLON MO 63366- Level of Care: ALF Bed Capacity	18
Mailing Address PO BOX 815  County SAINT CHARLES  DMH Licensed	Yes
O'FALLON MO 63366-0815 Region 5 Facility Number	10934
PAUL L & MARTHA BARONE CARE CENTER	
PAUL L & MARTHA BARONE CARE CENTER 2101 NORTH ASH ST  Telephone (417) 448-3999  Alzheimer's Unit	Yes
	Yes 40
2101 NORTH ASH ST Telephone (417) 448-3999 Alzheimer's Unit	
2101 NORTH ASH ST  NEVADA  MO 64772-1082  Telephone (417) 448-3999 Alzheimer's Unit Level of Care: SNF  Bed Capacity	40
2101 NORTH ASH ST  NEVADA  MO 64772-1082  Level of Care: SNF  Bed Capacity  Mailing Address 2101 N ASH ST  NEVADA  MO 64772-1082  Region 1 Medicaid  Facility Number	40 No
2101 NORTH ASH ST  NEVADA  MO 64772-1082  Level of Care: SNF  Bed Capacity  County VERNON  DMH Licensed  Region 1 Medicaid  Facility Number  PEACE HAVEN ASSOCIATION	40 No 16917
2101 NORTH ASH ST  NEVADA  MO 64772-1082  Level of Care: SNF  Bed Capacity  County VERNON  DMH Licensed  Region 1 Medicaid  Facility Number  PEACE HAVEN ASSOCIATION  12630 ROTT RD  Telephone (314) 965-3833  Alzheimer's Unit	40 No 16917 No
2101 NORTH ASH ST  NEVADA  MO 64772-1082  Level of Care: SNF  Bed Capacity  County VERNON  DMH Licensed  Region 1 Medicaid  Facility Number  PEACE HAVEN ASSOCIATION  12630 ROTT RD  SAINT LOUIS  MO 63127-1214  Telephone (314) 965-3833  Alzheimer's Unit  Level of Care: ICF  Bed Capacity	40 No 16917 No 42
2101 NORTH ASH ST  NEVADA  MO 64772-1082  Level of Care: SNF  Bed Capacity  Mailing Address 2101 N ASH ST  NEVADA  MO 64772-1082  Region 1 Medicaid  Facility Number  PEACE HAVEN ASSOCIATION  12630 ROTT RD  SAINT LOUIS  MO 63127-1214  Level of Care: ICF  Bed Capacity  (314) 965-3833  Alzheimer's Unit  Level of Care: ICF  Bed Capacity  County  SAINT LOUIS COUNTY  DMH Licensed	40 No 16917 No 42 No
2101 NORTH ASH ST  NEVADA  MO 64772-1082  Level of Care: SNF  Bed Capacity  County VERNON  DMH Licensed  Region 1 Medicaid  Facility Number  PEACE HAVEN ASSOCIATION  12630 ROTT RD  SAINT LOUIS  MO 63127-1214  Telephone (314) 965-3833  Alzheimer's Unit  Level of Care: ICF  Bed Capacity	40 No 16917 No 42
2101 NORTH ASH ST  NEVADA  MO 64772-1082  Level of Care: SNF  Bed Capacity  Mailing Address 2101 N ASH ST  NEVADA  MO 64772-1082  Region 1 Medicaid  Facility Number  PEACE HAVEN ASSOCIATION  12630 ROTT RD  SAINT LOUIS  MO 63127-1214  Level of Care: ICF  Bed Capacity  (314) 965-3833  Alzheimer's Unit  Level of Care: ICF  Bed Capacity  County  SAINT LOUIS COUNTY  DMH Licensed	40 No 16917 No 42 No
2101 NORTH ASH ST  NEVADA  MO 64772-1082  Level of Care: SNF  Bed Capacity  County VERNON  DMH Licensed  Region 1 Medicaid  Facility Number  PEACE HAVEN ASSOCIATION  12630 ROTT RD  SAINT LOUIS  MO 63127-1214  Mo 63127-1214  Mo 63127-1214  Mo 63127-1214  Region 7  SAINT LOUIS COUNTY  MO 63127-1214  Region 7  Facility Number	40 No 16917 No 42 No
Telephone (417) 448-3999 Alzheimer's Unit NEVADA MO 64772-1082 Level of Care: SNF Bed Capacity Mailing Address 2101 N ASH ST NEVADA MO 64772-1082 Region 1 Medicaid Facility Number  PEACE HAVEN ASSOCIATION 12630 ROTT RD SAINT LOUIS MO 63127-1214 Level of Care: ICF Bed Capacity Mailing Address 12630 ROTT RD SAINT LOUIS MO 63127-1214 Region 7 Facility Number  PEARL'S II EDEN FOR ELDERS	40 No 16917 No 42 No 06369
Telephone (417) 448-3999 Alzheimer's Unit NEVADA MO 64772-1082 Level of Care: SNF Bed Capacity Mailing Address 2101 N ASH ST NEVADA MO 64772-1082 Region 1 Medicaid Facility Number  PEACE HAVEN ASSOCIATION 12630 ROTT RD SAINT LOUIS MO 63127-1214 Level of Care: ICF Bed Capacity Mailing Address 12630 ROTT RD SAINT LOUIS MO 63127-1214 Region 7 Facility Number  PEARL'S II EDEN FOR ELDERS 611 NORTH COLLEGE Telephone (660) 748-4407 Alzheimer's Unit	40 No 16917 No 42 No 06369

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PEARL'S RESIDENTIAL CARE			
308 SOUTH BROADWAY	<b>Telephone</b> (660) 748-3307	Alzheimer's Unit	No
PRINCETON MO 64673-1111	Level of Care: RCF*	Bed Capacity	26
Mailing Address 308 S BROADWAY	County MERCER	DMH Licensed	Yes
PRINCETON MO 64673-1111	Region 4	Facility Number	20643
PETTIS COUNTY ASSISTED LIVING, LLC			
3017 BROOKING PARK AVENUE	<b>Telephone</b> (660) 851-7118	Alzheimer's Unit	No
SEDALIA MO 65301-9327	Level of Care: ALF**	Bed Capacity	139
Mailing Address 3017 BROOKING PARK AVE	County PETTIS	DMH Licensed	Yes
SEDALIA MO 65301-9327	Region 6	Facility Number	30112
SEPTEM NO 03301 7327	Acgion 0	racinty (value)	30112
PILLARS OF NORTH COUNTY HEALTH & REHABILITATION CENT	TER, THE		
13700 OLD HALLS FERRY RD	<b>Telephone</b> (314) 355-0760	Alzheimer's Unit	No
FLORISSANT MO 63033-4109	Level of Care: SNF	<b>Bed Capacity</b>	120
Mailing Address 13700 OLD HALLS FERRY RD	County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT MO 63033-4109	Region 7 Medicare/Medicaid	Facility Number	07440
DIN O A VOLUMENTO			
PIN OAKS LIVING CENTER	m 1 1 (572) 591 70(1		N
1525 WEST MONROE ST	<b>Telephone</b> (573) 581-7261	Alzheimer's Unit	No 124
MEXICO MO 65265-1201	Level of Care: SNF	Bed Capacity	124
Mailing Address 1525 WEST MONROE ST	County AUDRAIN	DMH Licensed	No
MEXICO MO 65265-1201	Region 5 Medicare/Medicaid	Facility Number	05804
PINE LODGE RESIDENTIAL CARE			
967 N MAPLE ST	<b>Telephone</b> (417) 345-0310	Alzheimer's Unit	No
BUFFALO MO 65622-7568	Level of Care: RCF	Bed Capacity	20
Mailing Address 967 N MAPLE ST	County DALLAS	DMH Licensed	No
BUFFALO MO 65622-7568	Region 1	Facility Number	25563
PINE VALLEY AT THE WOODLANDS			
620 WOODLAND MEADOWS	<b>Telephone</b> (636) 202-1050	Alzheimer's Unit	No
ARNOLD MO 63010-2030	Level of Care: ALF**	Bed Capacity	48
Mailing Address 620 WOODLAND MEADOWS	<b>County</b> JEFFERSON	DMH Licensed	No
ARNOLD MO 63010-2030	Region 2	Facility Number	31974
PINE VALLEY RCF			
3381 1st STREET	<b>Telephone</b> (573) 760-8601	Alzheimer's Unit	No
DOE RUN MO 63637-3155	Level of Care: RCF	Bed Capacity	12
Mailing Address 3381 1st STREET	County SAINT FRANCOIS	DMH Licensed	Yes
DOE RUN MO 63637-3155	Region 2	Facility Number	08379
PINE VIEW MANOR, INC			
307 NORTH PINEVIEW ST	<b>Telephone</b> (660) 783-2118	Alzheimer's Unit	No
STANBERRY MO 64489-1509	Level of Care: ALF**	<b>Bed Capacity</b>	12
Mailing Address 307 NORTH PINEVIEW ST	County GENTRY	DMH Licensed	No
STANBERRY MO 64489-1509	Region 4	Facility Number	05832

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PINE VIEW MANOR, INC			
307 NORTH PINEVIEW ST		<b>Telephone</b> (660) 783-2118	Alzheimer's Unit No
STANBERRY	MO 64489-1509	Level of Care: SNF	Bed Capacity 70
Mailing Address 307 NORTH PINEVI	EW ST	County GENTRY	<b>DMH Licensed</b> No
STANBERRY	MO 64489-1509	Region 4 Medicare/Medicaid	Facility Number 05832
PINEVIEW HEIGHTS ALF			
515 GARST		<b>Telephone</b> (417) 962-3713	Alzheimer's Unit No
CABOOL	MO 65689-9139	Level of Care: ALF	<b>Bed Capacity</b> 16
Mailing Address 515 GARST		County TEXAS	DMH Licensed Yes
CABOOL	MO 65689-9139	Region 1	Facility Number 24668
PIONEER SKILLED NURSING CEN 1500 SOUTH KANSAS AVE	VTER	<b>Telephone</b> (660) 376-2001	Alzheimer's Unit No
MARCELINE	MO 64658-1716	Telephone (660) 376-2001 Level of Care: SNF	Bed Capacity 96
Mailing Address 1500 S KANSAS AV		County CHARITON	DMH Licensed No
MARCELINE	MO 64658-1716	Region 5 Medicare/Medicaid	Facility Number 05900
PLEASANT HILL HEALTH AND R	EHARILITATION CENTER		
1300 BROADWAY	EMILITATION CENTER	<b>Telephone</b> (816) 540-2116	Alzheimer's Unit Yes
PLEASANT HILL	MO 64080-1842	Level of Care: SNF	Bed Capacity 90
Mailing Address 1300 BROADWAY	WO 04000-1042		DMH Licensed No
PLEASANT HILL	MO 64080-1842	0.044410	
FLEASANT HILL	IVIO 04060-1642	Region 3 Medicare/Medicaid	Facility Number 15101
PLEASANT VALLEY MANOR			
213 DAVIS DR		<b>Telephone</b> (417) 257-0179	Alzheimer's Unit No
WEST PLAINS	MO 65775-2274	Level of Care: RCF*	<b>Bed Capacity</b> 72
Mailing Address 213 DAVIS DR		County HOWELL	DMH Licensed No
WEST PLAINS	MO 65775-2274	Region 1	Facility Number 13641
PLEASANT VALLEY MANOR CAR	RE CENTER		
6814 SOBBIE RD		<b>Telephone</b> (816) 781-5277	Alzheimer's Unit No
LIBERTY	MO 64068-9555	Level of Care: SNF	<b>Bed Capacity</b> 102
Mailing Address 6814 SOBBIE RD		County CLAY	<b>DMH Licensed</b> No
LIBERTY	MO 64068-9555	Region 4 Medicare/Medicaid	Facility Number 06020
DI E A C A NIT VILEYA			
PLEASANT VIEW		m 1 1 (200 744 2050	
470 RAINBOW DR	NO 64402 1641	<b>Telephone</b> (660) 744-6252	Alzheimer's Unit No
ROCK PORT	MO 64482-1641	Level of Care: SNF	Bed Capacity 60
Mailing Address PO BOX 273		County ATCHISON	<b>DMH Licensed</b> No
ROCK PORT	MO 64482-0273	Region 4 Medicare/Medicaid	Facility Number 06041
PLEASANT VIEW			
641 EUCLID AVE		<b>Telephone</b> (573) 406-1090	Alzheimer's Unit No
HANNIBAL	MO 63401-2959	Level of Care: ALF**	Bed Capacity 41
Mailing Address 641 EUCLID AVE		County MARION	DMH Licensed No
HANNIBAL	MO 63401-2959	·	Facility Number 25358
III II II III III III	1710 UJTU1-4/J/	Region 5	racinty runner 23336

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POINT LOOKOUT NURSING & REHAB		
11103 HISTORIC HIGHWAY 165	Telephone (417) 334-4105 Alzheimer's Unit	Yes
HOLLISTER MO 65672-6239	1 0	130
Mailing Address 11103 HISTORIC HIGHWAY 165	County TANEY DMH Licensed	No
HOLLISTER MO 65672-6239	Region 1 Medicare/Medicaid Facility Number 12	2716
POPA GOOD SAMARITAN SERVICES, LLC		
16979 HWY 39	Telephone (417) 353-4448 Alzheimer's Unit	Yes
VERONA MO 65769-6319	-	8
Mailing Address 16979 HWY 39	County LAWRENCE DMH Licensed	No
VERONA MO 65769-6319	Region 1 Facility Number 3	0440
PORTAGEVILLE HEALTH CARE CENTER		
290 WEST STATE HWY 162	Telephone (573) 379-2017 Alzheimer's Unit	No
PORTAGEVILLE MO 63873-9397	Level of Care: SNF Bed Capacity	60
Mailing Address PO BOX 408	County NEW MADRID DMH Licensed	No
PORTAGEVILLE MO 63873-0408	Region 2 Medicare/Medicaid Facility Number 1	7119
PORTIA'S RESIDENTIAL CARE		
307 NORTH BROADWAY	Telephone (573) 686-3446 Alzheimer's Unit	No
POPLAR BLUFF MO 63901-5103	•	20
Mailing Address 307 N BROADWAY	County BUTLER DMH Licensed	Yes
POPLAR BLUFF MO 63901-5103	·	3002
		2002
POTOSI MANOR, INC		
307 SOUTH HIGHWAY 21	Telephone (573) 438-3225 Alzheimer's Unit	No
POTOSI MO 63664-9317	* v	90
Mailing Address 307 SOUTH HIGHWAY 21	County WASHINGTON DMH Licensed	No
POTOSI MO 63664-9317	Region 2 Medicare/Medicaid Facility Number 2	1648
PREFERRED FAMILY HEALTHCARE, INC		
900 EAST LAHARPE	Telephone (660) 665-1962 Alzheimer's Unit	No
KIRKSVILLE MO 63501-4520	· · · · · · · · · · · · · · · · · · ·	57
Mailing Address PO BOX 767	County ADAIR DMH Licensed	Yes
KIRKSVILLE MO 63501-0767	<b>Region</b> 5 Facility Number 2	1851
PREMIER RESIDENTIAL CARE		
109 EAST CROWDER RD	Telephone (660) 359-4292 Alzheimer's Unit	No
TRENTON MO 64683-1802	Level of Care: RCF Bed Capacity	12
Mailing Address 109 EAST CROWDER RD	County GRUNDY DMH Licensed	Yes
TRENTON MO 64683-1802	Region 4 Facility Number 02	2238
PRIMROSE RETIREMENT COMMUNITY OF JEFFE	RSON CITY	
1214 FREEDOM BLVD	Telephone (573) 634-5408 Alzheimer's Unit	No
JEFFERSON CITY MO 65109-0082	Level of Care: ALF** Bed Capacity	45
Mailing Address 1214 FREEDOM BLVD	County COLE DMH Licensed	No
JEFFERSON CITY MO 65109-0082	Region 6 Facility Number 29	9697

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PRIMROSE RETIREMENT COMM			
8559 NORTH LINE CREEK PARKWA	Y	<b>Telephone</b> (816) 468-8282	Alzheimer's Unit No
KANSAS CITY	MO 64154-2100	Level of Care: ALF**	Bed Capacity 44
Mailing Address 8559 NORTH LINE (		County PLATTE	<b>DMH Licensed</b> No
KANSAS CITY	MO 64154-2100	Region 4	Facility Number 29020
PROMISE CARE CENTER, LLC			
1111 CARE AVE		<b>Telephone</b> (417) 494-5037	Alzheimer's Unit No
NIXA	MO 65714-9679	Level of Care: ALF**	<b>Bed Capacity</b> 126
Mailing Address 1111 CARE AVE		County CHRISTIAN	<b>DMH Licensed</b> No
NIXA	MO 65714-9679	Region 1	Facility Number 15935
PROVISION OF PROMISE LLC 4528 NORTH MARKET ST		<b>Telephone</b> (314) 535-5509	Alzheimer's Unit No
SAINT LOUIS	MO 63113-2113	Level of Care: RCF	Bed Capacity 20
Mailing Address 4528 NORTH MARK		County SAINT LOUIS CITY	DMH Licensed Yes
-			
SAINT LOUIS	MO 63113-2113	Region 7	Facility Number 17937
PUTNAM COUNTY CARE CENTER	ł.		
1814 OAK ST		<b>Telephone</b> (660) 947-2492	Alzheimer's Unit NO
UNIONVILLE	MO 63565-1275	Level of Care: SNF	Bed Capacity 60
Mailing Address 1814 OAK ST	110 03303 1273	County PUTNAM	DMH Licensed No
UNIONVILLE	MO 63565-1275	Region 5 Medicare/Medicaid	Facility Number 06516
	110 00000 1270	region 5 incurcare/incurcare	ruemey (vamper 00010
PUXICO NURSING & REHABILIAT	TION CENTER		
540 NORTH HIGHWAY 51		<b>Telephone</b> (573) 222-3125	Alzheimer's Unit No
PUXICO	MO 63960-9117	Level of Care: SNF	<b>Bed Capacity</b> 60
Mailing Address 540 NORTH HWY 5	1	County STODDARD	DMH Licensed No
PUXICO	MO 63960-9117	Region 2 Medicare/Medicaid	Facility Number 03163
QUAIL RUN HEALTH CARE CENT	ER	T. I	
1405 WEST GRAND AVE	MO (4400 1110	<b>Telephone</b> (816) 632-2151	Alzheimer's Unit No
CAMERON  M. W. All DO BOY 525	MO 64429-1118	Level of Care: SNF	Bed Capacity 84
Mailing Address PO BOX 525	MO (4400.0505	County DEKALB	DMH Licensed No
CAMERON	MO 64429-0525	Region 4 Medicare/Medicaid	Facility Number 03829
QUALITY RESIDENTIAL CARE			
2034 WEST COLLEGE		<b>Telephone</b> (417) 831-6466	Alzheimer's Unit No
SPRINGFIELD	MO 65806-1524	Level of Care: RCF*	Bed Capacity 42
Mailing Address PO BOX 8127		County GREENE	DMH Licensed Yes
SPRINGFIELD	MO 65801-8127	Region 1	Facility Number 13150
			13130
QUARTERS AT DES PERES, THE			
13230 MANCHESTER RD		<b>Telephone</b> (314) 821-2886	Alzheimer's Unit No
DES PERES	MO 63131-1706	Level of Care: SNF	<b>Bed Capacity</b> 147
Mailing Address 13230 MANCHESTE	ER RD	County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
DES PERES	MO 63131-1706	Region 7 Medicare/Medicaid	Facility Number 26726

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RANCHO REHAB AND HEALTHCA	ARE CENTER		
615 RANCHO LN		<b>Telephone</b> (314) 839-2150	Alzheimer's Unit No
FLORISSANT	MO 63031-1717	Level of Care: SNF	<b>Bed Capacity</b> 120
Mailing Address 615 RANCHO LN		County SAINT LOUIS COUNTY	<b>DMH Licensed</b> No
FLORISSANT	MO 63031-1717	Region 7 Medicare/Medicaid	Facility Number 02585
RATLIFF CARE CENTER			
717 NORTH SPRIGG		<b>Telephone</b> (573) 335-5810	Alzheimer's Unit No
CAPE GIRARDEAU	MO 63701-4815	Level of Care: SNF	Bed Capacity 46
Mailing Address 717 NORTH SPRIGG		County CAPE GIRARDEAU	DMH Licensed No
CAPE GIRARDEAU	MO 63701-4815	Region 2 Medicare/Medicaid	Facility Number 17420
CAI E GIRARDEAU	WO 03701-4013	Region 2 Medicare/Medicaid	racinty Number 17420
RAVENWOOD - ASSISTED LIVING	BY AMERICARE		
1950 EAST REPUBLIC RD		<b>Telephone</b> (417) 890-6000	Alzheimer's Unit Yes
SPRINGFIELD	MO 65804-6763	Level of Care: ALF**	Bed Capacity 66
Mailing Address 1950 E REPUBLIC R		County GREENE	<b>DMH Licensed</b> No
SPRINGFIELD	MO 65804-6763	Region 1	Facility Number 20791
RAVENWOOD TERRACE - ASSISTI	ED LIVING BY AMERICARE		
1830 RAVENWOOD		<b>Telephone</b> (660) 263-8004	Alzheimer's Unit Yes
MOBERLY	MO 65270-3002	Level of Care: ALF**	<b>Bed Capacity</b> 55
Mailing Address 1830 RAVENWOOD		County RANDOLPH	DMH Licensed No
MOBERLY	MO 65270-3002	Region 5	Facility Number 16411
RAYTOWN BICKFORD HOUSE			
9110 EAST 63RD ST		<b>Telephone</b> (816) 353-3400	Alzheimer's Unit No
RAYTOWN	MO 64133-4893	Level of Care: ALF**	<b>Bed Capacity</b> 85
Mailing Address 9110 EAST 63RD ST		County JACKSON	DMH Licensed No
RAYTOWN	MO 64133-4893	Region 3	Facility Number 24227
		and a second	2.221
REDWOOD OF BLUE RIVER		T. I. I. (016) 762 4444	A11.
10425 CHESTNUT DR	MO 54407 0004	<b>Telephone</b> (816) 763-4444	Alzheimer's Unit Yes
KANSAS CITY	MO 64137-3201	Level of Care: SNF	Bed Capacity 160
Mailing Address 10425 CHESTNUT D		County JACKSON	DMH Licensed No
KANSAS CITY	MO 64137-3201	Region 3 Medicare/Medicaid	Facility Number 19114
REDWOOD OF CAMERON			
801 EUCLID AVE		<b>Telephone</b> (816) 632-7254	Alzheimer's Unit No
CAMERON	MO 64429-2003	Level of Care: SNF	Bed Capacity 120
Mailing Address PO BOX 438		County CLINTON	DMH Licensed No
CAMERON	MO 64429-0438	Region 4 Medicare/Medicaid	Facility Number 00983
REDWOOD OF CARMEL HILLS			
810 EAST WALNUT ST		<b>Telephone</b> (816) 461-9600	Alzheimer's Unit Yes
INDEPENDENCE	MO 64050-4025	Level of Care: SNF	<b>Bed Capacity</b> 194
Mailing Address 810 EAST WALNUT	ST	County JACKSON	DMH Licensed No
INDEPENDENCE	MO 64050-4025	Region 3 Medicare/Medicaid	Facility Number 23422
		8	•

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REDWOOD OF INDEPENDENCE		T. I		
1800 S SWOPE DR	NO 64057 1004	<b>Telephone</b> (816) 257-2566		Yes
INDEPENDENCE	MO 64057-1084	Level of Care: SNF		130
Mailing Address 1800 S SWOPE DR	MO 64057 1094	County JACKSON		No
INDEPENDENCE	MO 64057-1084	Region 3 Medicare/Medicaid	Facility Number 220	063
REDWOOD OF KANSAS CITY SOU	ТН			
8033 HOLMES ROAD		<b>Telephone</b> (816) 363-6222	Alzheimer's Unit	No
KANSAS CITY	MO 64131-2115	Level of Care: SNF		100
Mailing Address 8033 HOLMES ROAL		County JACKSON	= -	No
KANSAS CITY	MO 64131-2115	Region 3 Medicare/Medicaid		680
REDWOOD OF RAYMORE				
600 EAST SUNRISE DR		<b>Telephone</b> (816) 322-1991		Yes
RAYMORE	MO 64083-9037	Level of Care: SNF		152
Mailing Address 600 EAST SUNRISE	DR	County CASS	DMH Licensed	No
RAYMORE	MO 64083-9037	Region 3 Medicare/Medicaid	Facility Number 161	170
REPUBLIC NURSING & REHAB				
901 EAST HIGHWAY 174		<b>Telephone</b> (417) 732-1822	Alzheimer's Unit	Yes
REPUBLIC	MO 65738-1155	Level of Care: SNF		127
Mailing Address 901 EAST HIGHWAY		County GREENE	• •	No
REPUBLIC	MO 65738-1155	Region 1 Medicare/Medicaid		684
KEI OBEIC	110 03/30 1133	Region 1 Wedicare/Medicard	Taciney Number 130	004
REST HAVEN CONVALESCENT &	RETIREMENT HOME			
1800 SOUTH INGRAM		<b>Telephone</b> (660) 827-0845	Alzheimer's Unit	No
SEDALIA	MO 65301-7538	Level of Care: SNF	Bed Capacity	86
Mailing Address 1800 S INGRAM		County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-7538	Region 6 Medicare/Medicaid	Facility Number 065	582
RICHLAND CARE CENTER, INC				
400 TRI-COUNTY LANE		<b>Telephone</b> (573) 765-3243	Alzheimer's Unit	No
RICHLAND	MO 65556-8582	Level of Care: SNF	Bed Capacity	86
Mailing Address PO BOX 756		County PULASKI		No
RICHLAND	MO 65556-0756	Region 6 Medicare/Medicaid		100
RICHMOND TERRACE ASSISTED	LIVING			
1633 LACLEDE STATION RD		<b>Telephone</b> (314) 646-8000	Alzheimer's Unit	No
SAINT LOUIS	MO 63117-2038	Level of Care: ALF**	Bed Capacity	99
Mailing Address 1633 LACLEDE STA	TION RD	County SAINT LOUIS COUNTY		Yes
SAINT LOUIS	11011112			269
	MO 63117-2038	Region 7	Facility Number 222	
		Region 7	Facility Number 222	
RIDGE CREST NURSING CENTER				
		Region 7  Telephone (660) 429-2177  Level of Care: SNF	Alzheimer's Unit	Yes
RIDGE CREST NURSING CENTER 706 SOUTH MITCHELL WARRENSBURG	MO 64093-2828	<b>Telephone</b> (660) 429-2177	Alzheimer's Unit Bed Capacity	Yes
RIDGE CREST NURSING CENTER 706 SOUTH MITCHELL	MO 64093-2828	Telephone (660) 429-2177 Level of Care: SNF	Alzheimer's Unit Bed Capacity DMH Licensed	Yes 120

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	CLVPPP		
RIDGEVIEW ASSISTED LIVING CI	ENTER	T. 1 (770) 504 4400	
13134 STATE HIGHWAY 25		<b>Telephone</b> (573) 624-4433	Alzheimer's Unit No
DEXTER	MO 63841-9740	Level of Care: ALF**	Bed Capacity 26
Mailing Address 13134 STATE HIGHY		County STODDARD	<b>DMH Licensed</b> No
DEXTER	MO 63841-9740	Region 2	Facility Number 10128
RIDGEVIEW LIVING COMMUNITY	Y		
500 BARRETT DRIVE		<b>Telephone</b> (573) 276-3843	Alzheimer's Unit No
MALDEN	MO 63863-1204	Level of Care: SNF	<b>Bed Capacity</b> 96
Mailing Address 500 BARRETT DRIV	E	County DUNKLIN	<b>DMH Licensed</b> No
MALDEN	MO 63863-1204	Region 2 Medicare/Medicaid	Facility Number 06656
DIDCEWAY DECIDENTIAL CADE			
RIDGEWAY RESIDENTIAL CARE 431 RUSSELL		<b>Telephone</b> (573) 468-4318	Alzheimer's Unit No
SULLIVAN	MO 63080-2228	Level of Care: ALF	Bed Capacity 20
	MO 03080-2228		• •
Mailing Address PO BOX 267	MO (2000 02/7	County FRANKLIN	DMH Licensed Yes
SULLIVAN	MO 63080-0267	Region 6	Facility Number 06668
RIVER CITY LIVING COMMUNITY	Y		
3038 WEST TRUMAN BLVD		<b>Telephone</b> (573) 893-3404	Alzheimer's Unit Yes
JEFFERSON CITY	MO 65109-0525	Level of Care: SNF	Bed Capacity 87
Mailing Address 3038 WEST TRUMA		County COLE	DMH Licensed No
JEFFERSON CITY	MO 65109-0525	Region 6 Medicare/Medicaid	Facility Number 04826
JETT ENDOTY CIT I	1410 03107 0323	Region 6 Medical e/Medicald	racinty (uniber 04820
RIVER CROSSING OF CREVE COR	EUR		
11278 SCHUETZ RD		<b>Telephone</b> (314) 991-4066	Alzheimer's Unit No
SAINT LOUIS	MO 63146-4957	Level of Care: SNF	Bed Capacity 120
Mailing Address 11278 SCHUETZ RD	)	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63146-4957	Region 7 Medicare/Medicaid	Facility Number 16378
DIVIED MICH. A COLORED I WING I	NY AMERICA DE		
RIVER MIST - ASSISTED LIVING E 2050 WEST MAUD	OI AMERICARE	<b>Telephone</b> (573) 686-2833	Alzheimer's Unit No
	MO (2001 4000	• '	
POPLAR BLUFF	MO 63901-4000	Level of Care: ALF**	Bed Capacity 42
Mailing Address 2050 WEST MAUD	NO (2001 4000	County BUTLER	DMH Licensed No
POPLAR BLUFF	MO 63901-4000	Region 2	Facility Number 20291
RIVER OAKS CARE CENTER			
1001 NORTH WALNUT		<b>Telephone</b> (573) 695-2121	Alzheimer's Unit No
STEELE	MO 63877-1355	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address 1001 N WALNUT		County PEMISCOT	DMH Licensed No
STEELE	MO 63877-1355	Region 2 Medicare/Medicaid	Facility Number 06672
	- 00077 2000	- incutary incutaru	
RIVERBEND HEIGHTS HEALTH &	REHABILITATION		
1221 HIGHWAY 13 SOUTH		<b>Telephone</b> (660) 259-4695	Alzheimer's Unit Yes
LEXINGTON	MO 64067-7187	Level of Care: SNF	<b>Bed Capacity</b> 154
Mailing Address 1221 HIGHWAY 13 S		County LAFAYETTE	<b>DMH Licensed</b> No
LEXINGTON	MO 64067-7187	Region 3 Medicare/Medicaid	Facility Number 04333

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RIVERDELL CARE CENTER				
1121 11TH ST		<b>Telephone</b> (660) 882-7600	Alzheimer's Unit	No
BOONVILLE	MO 65233-1419	Level of Care: SNF	Bed Capacity	60
Mailing Address 1121 11TH ST		County COOPER	DMH Licensed	No
BOONVILLE	MO 65233-1419	Region 6 Medicare/Medicaid	Facility Number	14428
RIVERSIDE NURSING & REHABIL	ITATION CENTER LLC			
4700 NW CLIFFVIEW DR	HAHON CENTER, EEC	<b>Telephone</b> (816) 741-5105	Alzheimer's Unit	No
RIVERSIDE	MO 64150-1237	Level of Care: SNF	Bed Capacity	180
Mailing Address 4700 NW CLIFFVIEW		County PLATTE	DMH Licensed	No
RIVERSIDE	MO 64150-1237	Region 4 Medicare/Medicaid	Facility Number	01532
			·	
RIVERSIDE PLACE				
1616 WEISENBORN RD		<b>Telephone</b> (816) 232-9874	Alzheimer's Unit	No
SAINT JOSEPH	MO 64507-2527	Level of Care: ALF	Bed Capacity	100
Mailing Address 1616 WEISENBORN		County BUCHANAN	DMH Licensed	Yes
SAINT JOSEPH	MO 64507-2527	Region 4	Facility Number	10346
RIVERSIDE PLACE				
1616 WEISENBORN RD		<b>Telephone</b> (816) 232-9874	Alzheimer's Unit	Yes
SAINT JOSEPH	MO 64507-2527	Level of Care: SNF	Bed Capacity	90
Mailing Address 1616 WEISENBORN	RD	County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64508-2527	Region 4 Medicare/Medicaid	Facility Number	10346
RIVERVIEW AT THE PARK CARE	AND REHABILITATION CENTER			
1100 PROGRESS PARKWAY		Tolonhone (572) 992 2454	Alabaimanla Ilmit	
		<b>Telephone</b> (573) 883-3454	Alzheimer's Unit	YES
SAINTE GENEVIEVE	MO 63670-9232	Level of Care: SNF	<b>Bed Capacity</b>	120
Mailing Address 1100 PROGRESS PA	RKWAY	Level of Care: SNF County SAINTE GENEVIEVE	Bed Capacity DMH Licensed	120 No
		Level of Care: SNF	<b>Bed Capacity</b>	120
Mailing Address 1100 PROGRESS PA	RKWAY	Level of Care: SNF County SAINTE GENEVIEVE	Bed Capacity DMH Licensed	120 No
Mailing Address 1100 PROGRESS PA SAINTE GENEVIEVE	RKWAY	Level of Care: SNF County SAINTE GENEVIEVE	Bed Capacity DMH Licensed	120 No
Mailing Address 1100 PROGRESS PA SAINTE GENEVIEVE RIVERVIEW NURSING CENTER	RKWAY	Level of Care: SNF County SAINTE GENEVIEVE Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	120 No 06729
Mailing Address 1100 PROGRESS PA SAINTE GENEVIEVE RIVERVIEW NURSING CENTER 10303 STATE RD C	RKWAY MO 63670-9232	Level of Care: SNF County SAINTE GENEVIEVE Region 2 Medicare/Medicaid  Telephone (573) 676-3136	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	120 No 06729 No
Mailing Address 1100 PROGRESS PA SAINTE GENEVIEVE RIVERVIEW NURSING CENTER 10303 STATE RD C MOKANE	RKWAY MO 63670-9232	Level of Care: SNF County SAINTE GENEVIEVE Region 2 Medicare/Medicaid  Telephone (573) 676-3136 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	120 No 06729 No 60
Mailing Address 1100 PROGRESS PA SAINTE GENEVIEVE  RIVERVIEW NURSING CENTER 10303 STATE RD C MOKANE  Mailing Address 10303 STATE RD C	MO 65059-1211 MO 65059-1211	Level of Care: SNF County SAINTE GENEVIEVE Region 2 Medicare/Medicaid  Telephone (573) 676-3136 Level of Care: SNF County CALLAWAY	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 06729 No 60 No
Mailing Address 1100 PROGRESS PA SAINTE GENEVIEVE  RIVERVIEW NURSING CENTER 10303 STATE RD C MOKANE  Mailing Address 10303 STATE RD C MOKANE	MO 65059-1211 MO 65059-1211	Level of Care: SNF County SAINTE GENEVIEVE Region 2 Medicare/Medicaid  Telephone (573) 676-3136 Level of Care: SNF County CALLAWAY Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 06729 No 60 No
Mailing Address 1100 PROGRESS PA SAINTE GENEVIEVE  RIVERVIEW NURSING CENTER 10303 STATE RD C MOKANE Mailing Address 10303 STATE RD C MOKANE RIVERVIEW RESIDENTIAL PLACE	MO 65059-1211 MO 65059-1211	Level of Care: SNF County SAINTE GENEVIEVE Region 2 Medicare/Medicaid  Telephone (573) 676-3136 Level of Care: SNF County CALLAWAY Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 06729 No 60 No 06730
Mailing Address 1100 PROGRESS PA SAINTE GENEVIEVE  RIVERVIEW NURSING CENTER 10303 STATE RD C MOKANE  Mailing Address 10303 STATE RD C MOKANE  RIVERVIEW RESIDENTIAL PLACE 1200 WEST HALL ST	MO 63670-9232  MO 65059-1211  MO 65059-1211	Level of Care: SNF County SAINTE GENEVIEVE Region 2 Medicare/Medicaid  Telephone (573) 676-3136 Level of Care: SNF County CALLAWAY Region 6 Medicare/Medicaid  Telephone (417) 581-2510	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 06729 No 60 No 06730
Mailing Address 1100 PROGRESS PA SAINTE GENEVIEVE  RIVERVIEW NURSING CENTER 10303 STATE RD C MOKANE  Mailing Address 10303 STATE RD C MOKANE  RIVERVIEW RESIDENTIAL PLACE 1200 WEST HALL ST OZARK	MO 63670-9232  MO 65059-1211  MO 65059-1211	Level of Care: SNF County SAINTE GENEVIEVE Region 2 Medicare/Medicaid  Telephone (573) 676-3136 Level of Care: SNF County CALLAWAY Region 6 Medicare/Medicaid  Telephone (417) 581-2510 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	120 No 06729 No 60 No 06730
Mailing Address 1100 PROGRESS PASAINTE GENEVIEVE  RIVERVIEW NURSING CENTER 10303 STATE RD C MOKANE Mailing Address 10303 STATE RD C MOKANE  RIVERVIEW RESIDENTIAL PLACE 1200 WEST HALL ST OZARK Mailing Address PO BOX 157	MO 63670-9232  MO 65059-1211  MO 65059-1211  E  MO 65721-9103	Level of Care: SNF County SAINTE GENEVIEVE Region 2 Medicare/Medicaid  Telephone (573) 676-3136 Level of Care: SNF County CALLAWAY Region 6 Medicare/Medicaid  Telephone (417) 581-2510 Level of Care: RCF* County CHRISTIAN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	120 No 06729 No 60 No 06730
Mailing Address 1100 PROGRESS PASAINTE GENEVIEVE  RIVERVIEW NURSING CENTER 10303 STATE RD C MOKANE  Mailing Address 10303 STATE RD C MOKANE  RIVERVIEW RESIDENTIAL PLACE 1200 WEST HALL ST OZARK  Mailing Address PO BOX 157 OZARK  RIVERVIEW, THE	MO 63670-9232  MO 65059-1211  MO 65059-1211  E  MO 65721-9103	Level of Care: SNF County SAINTE GENEVIEVE Region 2 Medicare/Medicaid  Telephone (573) 676-3136 Level of Care: SNF County CALLAWAY Region 6 Medicare/Medicaid  Telephone (417) 581-2510 Level of Care: RCF* County CHRISTIAN Region 1	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 06729  No 60 No 06730  No 40 No 01426
Mailing Address 1100 PROGRESS PASAINTE GENEVIEVE  RIVERVIEW NURSING CENTER 10303 STATE RD C MOKANE  Mailing Address 10303 STATE RD C MOKANE  RIVERVIEW RESIDENTIAL PLACE 1200 WEST HALL ST OZARK  Mailing Address PO BOX 157 OZARK  RIVERVIEW, THE 5500 SOUTH BROADWAY	MO 63670-9232  MO 65059-1211  MO 65059-1211  E  MO 65721-9103  MO 65721-0157	Level of Care: SNF County SAINTE GENEVIEVE Region 2 Medicare/Medicaid  Telephone (573) 676-3136 Level of Care: SNF County CALLAWAY Region 6 Medicare/Medicaid  Telephone (417) 581-2510 Level of Care: RCF* County CHRISTIAN Region 1  Telephone (314) 353-5900	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 06729 No 60 No 06730 No 40 No 01426
Mailing Address 1100 PROGRESS PASAINTE GENEVIEVE  RIVERVIEW NURSING CENTER 10303 STATE RD C MOKANE  Mailing Address 10303 STATE RD C MOKANE  RIVERVIEW RESIDENTIAL PLACE 1200 WEST HALL ST OZARK  Mailing Address PO BOX 157 OZARK  RIVERVIEW, THE 5500 SOUTH BROADWAY SAINT LOUIS	MO 63670-9232  MO 65059-1211  MO 65059-1211  E  MO 65721-9103  MO 65721-0157	Level of Care: SNF County SAINTE GENEVIEVE Region 2 Medicare/Medicaid  Telephone (573) 676-3136 Level of Care: SNF County CALLAWAY Region 6 Medicare/Medicaid  Telephone (417) 581-2510 Level of Care: RCF* County CHRISTIAN Region 1  Telephone (314) 353-5900 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	No 06729  No 60 No 06730  No 40 No 01426
Mailing Address 1100 PROGRESS PASAINTE GENEVIEVE  RIVERVIEW NURSING CENTER 10303 STATE RD C MOKANE  Mailing Address 10303 STATE RD C MOKANE  RIVERVIEW RESIDENTIAL PLACE 1200 WEST HALL ST OZARK  Mailing Address PO BOX 157 OZARK  RIVERVIEW, THE 5500 SOUTH BROADWAY	MO 63670-9232  MO 65059-1211  MO 65059-1211  E  MO 65721-9103  MO 65721-0157	Level of Care: SNF County SAINTE GENEVIEVE Region 2 Medicare/Medicaid  Telephone (573) 676-3136 Level of Care: SNF County CALLAWAY Region 6 Medicare/Medicaid  Telephone (417) 581-2510 Level of Care: RCF* County CHRISTIAN Region 1  Telephone (314) 353-5900	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	120 No 06729 No 60 No 06730 No 40 No 01426

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RIVERVIEW, THE				
5500 SOUTH BROADWAY		<b>Telephone</b> (314) 353-5900	Alzheimer's Unit	No
SAINT LOUIS	MO 63111-2025	Level of Care: RCF*	<b>Bed Capacity</b>	11
Mailing Address 5500 S BROADWAY	7	County SAINT LOUIS CITY	DMH Licensed	No
SAINT LOUIS	MO 63111-2025	Region 7	Facility Number	02273
		<u> </u>		
RIVERWAYS MANOR				
403 WATERCRESS RD		<b>Telephone</b> (573) 323-4282	Alzheimer's Unit	No
VAN BUREN	MO 63965-9100	Telephone (573) 323-4282 Level of Care: SNF		60
	WO 03903-9100		Bed Capacity	No
Mailing Address PO BOX 969 VAN BUREN	MO 62065 0060		DMH Licensed	
VAIN BUREIN	MO 63965-0969	Region 2 Medicare/Medicaid	Facility Number	06744
DO 1 DAVIG DAVID VVI 1 V MVI 1 V MVI 1 V MVI				
ROARING RIVER HEALTH AND R	EHABILITATION	TELL (417) 947 9194	A1 1 *	37
812 OLD EXETER RD	NO 65625 1504	<b>Telephone</b> (417) 847-2184	Alzheimer's Unit	Yes
CASSVILLE	MO 65625-1704	Level of Care: SNF	Bed Capacity	90
Mailing Address 812 OLD EXETER R		County BARRY	DMH Licensed	No
CASSVILLE	MO 65625-1704	Region 1 Medicare/Medicaid	Facility Number	10644
DO 077 407 1 N D 777 7 1 07				
ROCK ISLAND VILLAGE		T. 1 (572) 557 0545		37
619 EAST 8TH STREET	1.00 (500 ( 1510	<b>Telephone</b> (573) 557-9545	Alzheimer's Unit	Yes
ELDON	MO 65026-4740	Level of Care: ALF**	Bed Capacity	70
Mailing Address 619 EAST 8TH STRE		County MILLER	DMH Licensed	No
ELDON	MO 65026-4740	Region 6	Facility Number	30865
DOOK DODIE NUDGING GENEED				
ROCK POINT NURSING CENTER		(572) 202 2212		T/TEG
8477 NORTH STREET	MO (5420 0007	Telephone (573) 292-3212	Alzheimer's Unit	YES
BIRCH TREE	MO 65438-8887	Level of Care: SNF	Bed Capacity	86 N
Mailing Address 8477 NORTH STREE		County SHANNON	DMH Licensed	No
BIRCH TREE	MO 65438-8887	Region 2 Medicare/Medicaid	Facility Number	00560
DOCKHILI MANOD ASSISTED LIV	VINC			
ROCKHILL MANOR ASSISTED LIV 4235 LOCUST ST	VING	<b>Telephone</b> (816) 931-2225	Alzheimer's Unit	No
KANSAS CITY	MO 64110-1016	Level of Care: ALF**	Bed Capacity	36
	MO 04110-1010		DMH Licensed	
Mailing Address PO BOX 5930	MO (4171 0020	·		Yes
KANSAS CITY	MO 64171-0930	Region 3	Facility Number	06794
ROCKHILL MANOR ASSISTED LIV	VINC			
4235 LOCUST ST	VING	<b>Telephone</b> (816) 931-2225	Alzheimer's Unit	No
KANSAS CITY	MO 64110-1016	Level of Care: ALF	Bed Capacity	154
Mailing Address PO BOX 5930	MO 07110-1010	County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64171 0030	•		
KAINSAS CIT I	MO 64171-0930	Region 3	Facility Number	06794
ROCKY RIDGE MANOR				
3111 HIGHWAY A		<b>Telephone</b> (417) 924-8116	Alzheimer's Unit	No
MANSFIELD	MO 65704-8105	Level of Care: SNF	Bed Capacity	65
Mailing Address 3111 HWY A		County WRIGHT	DMH Licensed	No
<b>6</b>				

Medicare/Medicaid

**Facility Number** 

04996

MO 65704-8105

MANSFIELD

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ROLLA HEALTH & REHABILITA	TION SUITES			
1200 MCCUTCHEN RD		<b>Telephone</b> (573) 364-2311	Alzheimer's Unit	Yes
ROLLA	MO 65401-2615	Level of Care: SNF	<b>Bed Capacity</b>	116
Mailing Address 1200 MCCUTCHEN	N RD	County PHELPS	DMH Licensed	No
ROLLA	MO 65401-2615	Region 6 Medicare/Medicaid	<b>Facility Number</b>	08862
ROLLA PRESBYTERIAN MANOR				
1200 HOMELIFE PLAZA		<b>Telephone</b> (573) 364-7336	Alzheimer's Unit	Yes
ROLLA	MO 65401-2512	Level of Care: ALF**	Bed Capacity	37
Mailing Address 1200 HOMELIFE Pl		County PHELPS	DMH Licensed	No
ROLLA	MO 65401-2512	Region 6	Facility Number	18727
ROLLA	WIO 03401-2312	Region	racinty Number	16/2/
DOLL A DESCRIPTION OF THE STATE				
ROLLA PRESBYTERIAN MANOR		Tolonhono (572) 264 7226	Alghoimon's Unit	Ma
1200 HOMELIFE PLAZA	MO (5401 0510	<b>Telephone</b> (573) 364-7336	Alzheimer's Unit	No
ROLLA	MO 65401-2512	Level of Care: SNF	Bed Capacity	30
Mailing Address 1200 HOMELIFE Pl		County PHELPS	DMH Licensed	No
ROLLA	MO 65401-2512	Region 6 Medicare/Medicaid	Facility Number	18727
BOORWOOD DEVINE AND THE CO	THE A DE CENTED			
ROSEWOOD REHAB AND HEALT	THCARE CENTER			
1415 WEST WHITE OAK	3.00 (10.00 0.000	<b>Telephone</b> (816) 254-3500	Alzheimer's Unit	Yes
INDEPENDENCE	MO 64050-2590	Level of Care: SNF	Bed Capacity	300
Mailing Address 1415 WEST WHITE		County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64050-2590	Region 3 Medicare/Medicaid	Facility Number	06604
	_			
ROSEWOOD RESIDENTIAL CARI	E	T. 1 (770) 244 0000		
13450 COUNTY RD 7040		<b>Telephone</b> (573) 341-8000	Alzheimer's Unit	No
ROLLA	MO 65401-8122	Level of Care: RCF	Bed Capacity	9
Mailing Address 13450 COUNTY RE		County PHELPS	DMH Licensed	No
ROLLA	MO 65401-8122	Region 6	Facility Number	21083
ROYAL OAK NURSING & REHAB	:			
4960 LACLEDE AVE		<b>Telephone</b> (314) 361-6240	Alzheimer's Unit	No
4960 LACLEDE AVE SAINT LOUIS	MO 63108-1404	Level of Care: SNF	<b>Bed Capacity</b>	168
4960 LACLEDE AVE SAINT LOUIS <b>Mailing Address</b> 4960 LACLEDE AV	MO 63108-1404 /E	Level of Care: SNF County SAINT LOUIS CITY	Bed Capacity DMH Licensed	168 No
4960 LACLEDE AVE SAINT LOUIS	MO 63108-1404	Level of Care: SNF	<b>Bed Capacity</b>	168
4960 LACLEDE AVE SAINT LOUIS <b>Mailing Address</b> 4960 LACLEDE AV SAINT LOUIS	MO 63108-1404 /E	Level of Care: SNF County SAINT LOUIS CITY	Bed Capacity DMH Licensed	168 No
4960 LACLEDE AVE SAINT LOUIS Mailing Address 4960 LACLEDE AV SAINT LOUIS ROYAL OAKS RESIDENCE	MO 63108-1404 /E	Level of Care: SNF County SAINT LOUIS CITY Region 7 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	168 No 06322
4960 LACLEDE AVE SAINT LOUIS Mailing Address 4960 LACLEDE AV SAINT LOUIS  ROYAL OAKS RESIDENCE 507 EAST MARSHALL	MO 63108-1404 //E MO 63108-1404	Level of Care: SNF County SAINT LOUIS CITY Region 7 Medicare/Medicaid  Telephone (660) 335-6500	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	168 No 06322 No
4960 LACLEDE AVE SAINT LOUIS Mailing Address 4960 LACLEDE AV SAINT LOUIS  ROYAL OAKS RESIDENCE 507 EAST MARSHALL SWEET SPRINGS	MO 63108-1404 /E	Level of Care: SNF County SAINT LOUIS CITY Region 7 Medicare/Medicaid  Telephone (660) 335-6500 Level of Care: ALF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	168 No 06322 No 51
4960 LACLEDE AVE SAINT LOUIS Mailing Address 4960 LACLEDE AV SAINT LOUIS  ROYAL OAKS RESIDENCE 507 EAST MARSHALL SWEET SPRINGS Mailing Address PO BOX 204	MO 63108-1404 /E MO 63108-1404 MO 65351-9759	Level of Care: SNF County SAINT LOUIS CITY Region 7 Medicare/Medicaid  Telephone (660) 335-6500 Level of Care: ALF County SALINE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	168 No 06322 No 51 Yes
4960 LACLEDE AVE SAINT LOUIS Mailing Address 4960 LACLEDE AV SAINT LOUIS  ROYAL OAKS RESIDENCE 507 EAST MARSHALL SWEET SPRINGS	MO 63108-1404 //E MO 63108-1404	Level of Care: SNF County SAINT LOUIS CITY Region 7 Medicare/Medicaid  Telephone (660) 335-6500 Level of Care: ALF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	168 No 06322 No 51
4960 LACLEDE AVE SAINT LOUIS  Mailing Address 4960 LACLEDE AV SAINT LOUIS  ROYAL OAKS RESIDENCE 507 EAST MARSHALL SWEET SPRINGS  Mailing Address PO BOX 204 SWEET SPRINGS	MO 63108-1404 /E MO 63108-1404 MO 65351-9759	Level of Care: SNF County SAINT LOUIS CITY Region 7 Medicare/Medicaid  Telephone (660) 335-6500 Level of Care: ALF County SALINE	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	168 No 06322 No 51 Yes
4960 LACLEDE AVE SAINT LOUIS  Mailing Address 4960 LACLEDE AV SAINT LOUIS  ROYAL OAKS RESIDENCE 507 EAST MARSHALL SWEET SPRINGS Mailing Address PO BOX 204 SWEET SPRINGS  RUSSELL MANOR	MO 63108-1404 /E MO 63108-1404 MO 65351-9759	Level of Care: SNF County SAINT LOUIS CITY Region 7 Medicare/Medicaid  Telephone (660) 335-6500 Level of Care: ALF County SALINE Region 5	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	168 No 06322 No 51 Yes 14953
4960 LACLEDE AVE SAINT LOUIS  Mailing Address 4960 LACLEDE AV SAINT LOUIS  ROYAL OAKS RESIDENCE 507 EAST MARSHALL SWEET SPRINGS Mailing Address PO BOX 204 SWEET SPRINGS  RUSSELL MANOR 510 EAST 2ND STREET	MO 63108-1404  //E  MO 63108-1404  MO 65351-9759  MO 65351-0204	Level of Care: SNF County SAINT LOUIS CITY Region 7 Medicare/Medicaid  Telephone (660) 335-6500 Level of Care: ALF County SALINE Region 5  Telephone (573) 598-4202	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	168 No 06322 No 51 Yes 14953
4960 LACLEDE AVE SAINT LOUIS  Mailing Address 4960 LACLEDE AV SAINT LOUIS  ROYAL OAKS RESIDENCE 507 EAST MARSHALL SWEET SPRINGS Mailing Address PO BOX 204 SWEET SPRINGS  RUSSELL MANOR 510 EAST 2ND STREET ANNAPOLIS	MO 63108-1404  MO 63108-1404  MO 65351-9759  MO 65351-0204  MO 63620-9104	Level of Care: SNF County SAINT LOUIS CITY Region 7 Medicare/Medicaid  Telephone (660) 335-6500 Level of Care: ALF County SALINE Region 5  Telephone (573) 598-4202 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	168 No 06322 No 51 Yes 14953
4960 LACLEDE AVE SAINT LOUIS  Mailing Address 4960 LACLEDE AV SAINT LOUIS  ROYAL OAKS RESIDENCE 507 EAST MARSHALL SWEET SPRINGS Mailing Address PO BOX 204 SWEET SPRINGS  RUSSELL MANOR 510 EAST 2ND STREET	MO 63108-1404  MO 63108-1404  MO 65351-9759  MO 65351-0204  MO 63620-9104	Level of Care: SNF County SAINT LOUIS CITY Region 7 Medicare/Medicaid  Telephone (660) 335-6500 Level of Care: ALF County SALINE Region 5  Telephone (573) 598-4202	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	168 No 06322 No 51 Yes 14953

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RUSSELL TOWNHOUSE				
207 FRONT ST		<b>Telephone</b> (573) 223-3918	Alzheimer's Unit	No
ANNAPOLIS	MO 63620-9130	Level of Care: RCF	Bed Capacity	18
Mailing Address 207 FRONT ST		County IRON	DMH Licensed	Yes
ANNAPOLIS	MO 63620-9130	Region 2	Facility Number 2	20185
SADDLER RESIDENTIAL CARE F	ACILITY INC			
730 HODIAMONT AVE		<b>Telephone</b> (314) 725-3709	Alzheimer's Unit	No
SAINT LOUIS	MO 63112-2002	Level of Care: ALF	Bed Capacity	20
Mailing Address 730 HODIAMONT A		County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS	MO 63112-2002	Region 7	Facility Number 1	6828
GAY EM GADE GENTER				
SALEM CARE CENTER 1203 NORTH JACKSON		<b>Telephone</b> (573) 729-6649	Alzheimer's Unit	No
	MO 65560 1076	• '		
SALEM	MO 65560-1076	Level of Care: SNF	Bed Capacity	60 N-
Mailing Address PO BOX 29	MO 65560 0020	County DENT	DMH Licensed	No
SALEM	MO 65560-0029	Region 6 Medicaid	Facility Number 0	)2354
SALEM RESIDENTIAL CARE				
1207 EAST ROOSEVELT ST		<b>Telephone</b> (573) 729-9449	Alzheimer's Unit	No
SALEM	MO 65560-9676	Level of Care: RCF*	Bed Capacity	35
Mailing Address 1207 EAST ROOSE		County DENT	DMH Licensed	No
SALEM	MO 65560-9676	Region 6		19746
ST NELEVI	MO 03300 7070	Acgion 0	racinty Number	19740
SALT RIVER COMMUNITY CARE	2			
142 SHELBY PLAZA RD		<b>Telephone</b> (573) 588-4175	Alzheimer's Unit	Yes
SHELBINA	MO 63468-1065	Level of Care: SNF	Bed Capacity	120
Mailing Address PO BOX 529		County SHELBY	DMH Licensed	No
SHELBINA	MO 63468-0529	Region 5 Medicare/Medicaid	Facility Number	)6934
SARCOXIE NURSING CENTER		T. 1 (417) 540 2424	A11.*	N.T.
1505 MINER	MO (10/2 0211	<b>Telephone</b> (417) 548-3434	Alzheimer's Unit	No
SARCOXIE	MO 64862-9211	Level of Care: SNF	Bed Capacity	40
Mailing Address PO BOX 248	MO (49/2 0249	County JASPER	DMH Licensed	No
SARCOXIE	MO 64862-0248	Region 1 Medicare/Medicaid	Facility Number 0	)6864
SCENIC NURSING AND REHABIL	ITATION CENTER, LLC			
1333 SCENIC DR	, 220	<b>Telephone</b> (636) 931-2995	Alzheimer's Unit	Yes
HERCULANEUM	MO 63048-1550	Level of Care: SNF	Bed Capacity	189
Mailing Address 1333 SCENIC DR		County JEFFERSON	DMH Licensed	No
HERCULANEUM	MO 63048-1550	Region 2 Medicare/Medicaid		9605
				. , 000
SCHUYLER COUNTY NURSING H	IOME			
1306 US HIGHWAY 63		<b>Telephone</b> (660) 766-2291	Alzheimer's Unit	No
QUEEN CITY	MO 63561-2251	Level of Care: SNF	<b>Bed Capacity</b>	60
Mailing Address 1306 US HIGHWAY	7 63	County SCHUYLER	DMH Licensed	No
QUEEN CITY	MO 63561-2251	Region 5 Medicare/Medicaid	Facility Number 0	07004
<b>(</b>		e		

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SEASONS REHAB AND HEALTHC	ARE CENTER			
15600 WOODS CHAPEL RD		<b>Telephone</b> (816) 478-4757	Alzheimer's Unit	Yes
KANSAS CITY	MO 64139-1261	Level of Care: SNF	Bed Capacity	78
Mailing Address 15600 WOODS CHA		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64139-1261	Region 3 Medicare/Medicaid	Facility Number	23712
SECRET GARDENS				
351 KEITH ST		<b>Telephone</b> (573) 518-0444	Alzheimer's Unit	No
PARK HILLS	MO 63601-2049	Level of Care: RCF	<b>Bed Capacity</b>	10
Mailing Address PO BOX 481		County SAINT FRANCOIS	DMH Licensed	Yes
PARK HILLS	MO 63601-0481	Region 2	Facility Number	17813
SENATH SOUTH HEALTH CARE	CENTER			
300 EAST HORNBECK ST		<b>Telephone</b> (573) 738-2627	Alzheimer's Unit	No
SENATH	MO 63876-9225	Level of Care: SNF	Bed Capacity	150
Mailing Address PO BOX 940	1110 050,0 > 225	County DUNKLIN	DMH Licensed	No
SENATH	MO 63876-0940	Region 2 Medicare/Medicaid	Facility Number	16147
	110 03070 0710	Region 2 Medicare/Medicard	Tuelley Tulliser	10147
SENECA HOME PLACE				
2400 SOUTH CHEROKEE AVE		<b>Telephone</b> (417) 776-8053	Alzheimer's Unit	No
SENECA	MO 64865-9323	Level of Care: RCF*		30
			Bed Capacity	
Mailing Address 2400 SOUTH CHER		County NEWTON	DMH Licensed	No
SENECA	MO 64865-9323	Region 1	Facility Number	17571
SENECA HOUSE				
		Telephone (417) 776 9041	Alahaiman'a Unit	No
914 CHICKESAW ST	MO (4965 0201	<b>Telephone</b> (417) 776-8041	Alzheimer's Unit	No
914 CHICKESAW ST SENECA	MO 64865-9281	Level of Care: SNF	Bed Capacity	80
914 CHICKESAW ST SENECA <b>Mailing Address</b> 914 CHICKESAW S	Γ	Level of Care: SNF County NEWTON	Bed Capacity DMH Licensed	80 No
914 CHICKESAW ST SENECA		Level of Care: SNF	Bed Capacity	80
914 CHICKESAW ST SENECA <b>Mailing Address</b> 914 CHICKESAW S' SENECA	Γ	Level of Care: SNF County NEWTON	Bed Capacity DMH Licensed	80 No
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER	Γ	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	80 No 17090
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72	Т МО 64865-9281	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid  Telephone (573) 729-6141	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	80 No 17090 No
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM	Γ	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid  Telephone (573) 729-6141 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	80 No 17090 No 90
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746	MO 64865-9281  MO 65560-7217	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid  Telephone (573) 729-6141 Level of Care: SNF County DENT	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	80 No 17090 No 90 No
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM	Т МО 64865-9281	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid  Telephone (573) 729-6141 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	80 No 17090 No 90
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA  SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM	MO 64865-9281  MO 65560-7217  MO 65560-0746	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid  Telephone (573) 729-6141 Level of Care: SNF County DENT	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	80 No 17090 No 90 No
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA  SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM SHADY OAKS HEALTHCARE CEN	MO 64865-9281  MO 65560-7217  MO 65560-0746	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid  Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	80 No 17090 No 90 No 07110
914 CHICKESAW ST SENECA  Mailing Address 914 CHICKESAW S' SENECA  SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM  Mailing Address PO BOX 746 SALEM  SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63	MO 64865-9281  MO 65560-7217  MO 65560-0746	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid  Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid  Telephone (417) 264-7256	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	80 No 17090 No 90 No 07110
914 CHICKESAW ST SENECA  Mailing Address 914 CHICKESAW S' SENECA  SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM  SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER	MO 64865-9281  MO 65560-7217  MO 65560-0746  WITER  MO 65791-1415	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid  Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid  Telephone (417) 264-7256 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	80 No 17090 No 90 No 07110
914 CHICKESAW ST SENECA Mailing Address 914 CHICKESAW S' SENECA  SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM  SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER Mailing Address 335 BUSINESS ROU	MO 64865-9281  MO 65560-7217  MO 65560-0746  STER  MO 65791-1415  UTE 63	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid  Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid  Telephone (417) 264-7256 Level of Care: SNF County OREGON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	80 No 17090 No 90 No 07110
914 CHICKESAW ST SENECA  Mailing Address 914 CHICKESAW S' SENECA  SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM Mailing Address PO BOX 746 SALEM  SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER	MO 64865-9281  MO 65560-7217  MO 65560-0746  WITER  MO 65791-1415	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid  Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid  Telephone (417) 264-7256 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	80 No 17090 No 90 No 07110
914 CHICKESAW ST SENECA  Mailing Address 914 CHICKESAW S' SENECA  SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM  Mailing Address PO BOX 746 SALEM  SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER  Mailing Address 335 BUSINESS ROUTHAYER	MO 64865-9281  MO 65560-7217  MO 65560-0746  STER  MO 65791-1415  JTE 63  MO 65791-1415	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid  Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid  Telephone (417) 264-7256 Level of Care: SNF County OREGON	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	80 No 17090 No 90 No 07110
914 CHICKESAW ST SENECA  Mailing Address 914 CHICKESAW S' SENECA  SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM  Mailing Address PO BOX 746 SALEM  SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER  Mailing Address 335 BUSINESS ROUTHAYER  SHANGRI-LA REHAB & LIVING CO	MO 64865-9281  MO 65560-7217  MO 65560-0746  STER  MO 65791-1415  JTE 63  MO 65791-1415	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid  Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid  Telephone (417) 264-7256 Level of Care: SNF County OREGON Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	80 No 17090 No 90 No 07110 No 120 No 01364
914 CHICKESAW ST SENECA  Mailing Address 914 CHICKESAW S' SENECA  SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM  Mailing Address PO BOX 746 SALEM  SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER  Mailing Address 335 BUSINESS ROUTHAYER  SHANGRI-LA REHAB & LIVING CEN 930 NORTH EAST DUNCAN RD	MO 64865-9281  MO 65560-7217  MO 65560-0746  WIER  MO 65791-1415  WIE 63  MO 65791-1415	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid  Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid  Telephone (417) 264-7256 Level of Care: SNF County OREGON Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	80 No 17090 No 90 No 07110 No 120 No 01364
914 CHICKESAW ST SENECA  Mailing Address 914 CHICKESAW S' SENECA  SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM  Mailing Address PO BOX 746 SALEM  SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER  Mailing Address 335 BUSINESS ROUTHAYER  SHANGRI-LA REHAB & LIVING CO 930 NORTH EAST DUNCAN RD BLUE SPRINGS	MO 64865-9281  MO 65560-7217  MO 65560-0746  WIER  MO 65791-1415  WENTER  MO 65791-1415  MO 64014-2173	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid  Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid  Telephone (417) 264-7256 Level of Care: SNF County OREGON Region 2 Medicare/Medicaid  Telephone (816) 229-6677 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	80 No 17090 No 90 No 07110 No 120 No 01364
914 CHICKESAW ST SENECA  Mailing Address 914 CHICKESAW S' SENECA  SEVILLE CARE CENTER 35625 HIGHWAY 72 SALEM  Mailing Address PO BOX 746 SALEM  SHADY OAKS HEALTHCARE CEN 335 BUSINESS ROUTE 63 THAYER  Mailing Address 335 BUSINESS ROUTHAYER  SHANGRI-LA REHAB & LIVING CEN 930 NORTH EAST DUNCAN RD	MO 64865-9281  MO 65560-7217  MO 65560-0746  WIER  MO 65791-1415  WENTER  MO 65791-1415  MO 64014-2173	Level of Care: SNF County NEWTON Region 1 Medicare/Medicaid  Telephone (573) 729-6141 Level of Care: SNF County DENT Region 6 Medicare/Medicaid  Telephone (417) 264-7256 Level of Care: SNF County OREGON Region 2 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	80 No 17090 No 90 No 07110 No 120 No 01364

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SHELBINA VILLA LIFECARE				
218 EAST SHELBINA AVE		<b>Telephone</b> (573) 588-4115	Alzheimer's Unit	No
SHELBINA	MO 63468-4328	Level of Care: ALF**	<b>Bed Capacity</b>	68
Mailing Address 218 EAST SHELBINA	A AVE	County SHELBY	DMH Licensed	No
SHELBINA	MO 63468-4328	Region 5	Facility Number	18584
SHEPHERD OF THE HILLS LIVING	G CENTER			
996 STATE HIGHWAY 248		<b>Telephone</b> (417) 334-6431	Alzheimer's Unit	No
BRANSON	MO 65616-8154	Level of Care: SNF	Bed Capacity	100
Mailing Address 996 STATE HWY 248	3	County TANEY	DMH Licensed	No
BRANSON	MO 65616-8154	Region 1 Medicare/Medicaid	Facility Number	06810
SHEPHERD'S VIEW ASSISTED LIV	INC			
100 SHEPHERDS LN	ING	<b>Telephone</b> (417) 778-7959	Alzheimer's Unit	No
ALTON	MO 65606-0429	Level of Care: ALF**	Bed Capacity	39
Mailing Address PO BOX 429	WO 03000-0429	County OREGON	DMH Licensed	No.
ALTON	MO 65606-0429	Region 2	Facility Number	
ALTON	MO 03000-0429	Kegion 2	racinty Number	23135
SHERIDAN AT CHESTERFIELD, TI	HE.			
16300 JUSTUS POST ROAD		<b>Telephone</b> (636) 778-4800	Alzheimer's Unit	Yes
CHESTERFIELD	MO 63017-4608	Level of Care: ALF**	Bed Capacity	95
Mailing Address 16300 JUSTUS POST		County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-4608	Region 7	Facility Number	30848
CHESTER EED	110 03017 1000	Region /	racinty (value)	30040
SHERIDAN AT CREVE COEUR, TH	E			
450 NORTH LINDBERGH BLVD		<b>Telephone</b> (314) 628-0004	Alzheimer's Unit	Yes
CREVE COEUR	MO 63141-7814	Level of Care: ALF**	Bed Capacity	53
Mailing Address 450 NORTH LINDBE	RGH BLVD	County SAINT LOUIS COUNTY	DMH Licensed	No
CREVE COEUR	MO 63141-7814	Region 7	<b>Facility Number</b>	30479
SHERIDAN AT LAUMEIER PARK, T	ГНЕ			
12422 ROTT ROAD		<b>Telephone</b> (314) 462-0222	Alzheimer's Unit	Yes
SUNSET HILLS	MO 63127-1247	Level of Care: ALF**	Bed Capacity	98
Mailing Address 12422 ROTT ROAD		County SAINT LOUIS COUNTY	DMH Licensed	No
SUNSET HILLS	MO 63127-1247	Region 7	Facility Number	30466
SHIRKEY NURSING & REHABILIT	ATION CENTER			
804 WOLLARD BLVD		<b>Telephone</b> (816) 776-5403	Alzheimer's Unit	Yes
RICHMOND	MO 64085-2227	Level of Care: SNF	Bed Capacity	197
Mailing Address 804 WOLLARD BLVI	D	County RAY	DMH Licensed	No
RICHMOND	MO 64085-2227	Region 4 Medicare/Medicaid	Facility Number	07289
SIKESTON CONVALESCENT CENT	TER	m 1 1 (200) 454 2000		
103 KENNEDY DR	NO (2001 512)	<b>Telephone</b> (573) 471-6900	Alzheimer's Unit	Yes
SIKESTON	MO 63801-5126	Level of Care: SNF	Bed Capacity	120
Mailing Address 103 KENNEDY DR		County SCOTT	DMH Licensed	No

Medicare/Medicaid

**Facility Number** 

07331

MO 63801-5126

SIKESTON

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SILEX COMMUNITY CARE			
111 DUNCAN MANSION RD	<b>Telephone</b> (573) 384-5218	Alzheimer's Unit	No
SILEX MO 63377-2229	Level of Care: SNF	Bed Capacity	60
Mailing Address 111 DUNCAN MANSION RD	County LINCOLN	DMH Licensed	No
SILEX MO 63377-2229	Region 5 Medicare/Medicaid	Facility Number	06838
SILEX RESIDENTIAL HOME, LLC			
145 DUNCAN MANSION RD	<b>Telephone</b> (573) 384-5213	Alzheimer's Unit	No
SILEX MO 63377-2229	Level of Care: RCF*	Bed Capacity	60
Mailing Address 145 DUNCAN MANSION RD	County LINCOLN	DMH Licensed	Yes
SILEX MO 63377-2229	Region 5	Facility Number	20982
SILVER CREEK - ASSISTED LIVING BY AMERICARE			
3325 TEXAS AVE	<b>Telephone</b> (417) 626-8100	Alzheimer's Unit	Yes
JOPLIN MO 64804-4343	Level of Care: ALF**	Bed Capacity	68
Mailing Address 3325 TEXAS AVE	County NEWTON	DMH Licensed	No
JOPLIN MO 64804-4343	Region 1	Facility Number	20541
SILVER SPUR			
3300 TEXAS AVE	<b>Telephone</b> (314) 773-3408	Alzheimer's Unit	No
SAINT LOUIS MO 63118-3111	Level of Care: ALF	Bed Capacity	37
Mailing Address 3300 TEXAS AVE	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63118-3111	Region 7	Facility Number	00185
S.M.Y. EGGL	region /	racinty runnocr	00103
SILVERSTONE PLACE			
2735 EAGLESON DR	<b>Telephone</b> (573) 426-6200	Alzheimer's Unit	No
ROLLA MO 65401-8384	Level of Care: SNF	Bed Capacity	110
Mailing Address 2735 EAGLESON DR	County PHELPS	DMH Licensed	No
ROLLA MO 65401-8384	Region 6 Medicare/Medicaid	Facility Number	29351
SISTERS MISSION			
3225 N FLORISSANT AVE	<b>Telephone</b> (314) 421-6022	Alzheimer's Unit	No
SAINT LOUIS MO 63107-3521	Level of Care: SNF	Bed Capacity	47
Mailing Address 3225 N FLORISSANT AVE		DMH Licensed	
	•		No
SAINT LOUIS MO 63107-3521	Region 7 Medicare/Medicaid	Facility Number	04563
SKYLINE ASSISTED LIVING LLC			
100 HARD ROCK RD	<b>Telephone</b> (573) 323-2108	Alzheimer's Unit	No
VAN BUREN MO 63965-7259	Level of Care: ALF**	<b>Bed Capacity</b>	24
Mailing Address PO BOX 780	<b>County</b> CARTER	DMH Licensed	Yes
VAN BUREN MO 63965-0780	Region 2	Facility Number	29947
	· <b>o</b> ·	•	
SMILEY MANOR LLC			
5415 THEKLA AVE	<b>Telephone</b> (314) 932-1360	Alzheimer's Unit	No
SAINT LOUIS MO 63120-2513	Level of Care: RCF	Bed Capacity	20
Mailing Address 5415 THEKLA AVE	County SAINT LOUIS CITY	DMH Licensed	Yes
SAINT LOUIS MO 63120-2513	Region 7	Facility Number	04078

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SMILEY MANOR WEST			
1119 GOODFELLOW BLVD		<b>Telephone</b> 314-833-3238	Alzheimer's Unit No
SAINT LOUIS	MO 63112-	Level of Care: RCF	Bed Capacity 27
Mailing Address 1119 GOODFELLOW	BLVD	County SAINT LOUIS CITY	<b>DMH Licensed</b> No
SAINT LOUIS	MO 63112-	Region 7	Facility Number 31147
SONSHINE MANOR			
300 SOUTH COTTONWOOD AVE		<b>Telephone</b> (417) 732-2929	Alzheimer's Unit No
REPUBLIC	MO 65738-2093	Level of Care: SNF	<b>Bed Capacity</b> 69
Mailing Address 300 SOUTH COTTON	WOOD AVE	County GREENE	<b>DMH Licensed</b> No
REPUBLIC	MO 65738-2093	Region 1 Medicare/Medicaid	Facility Number 16723
SOUTH COUNTY NUDSING HOME	INC		
SOUTH COUNTY NURSING HOME, 1101 WEST OUTER 21 RD	IIIC	<b>Telephone</b> (636) 296-5455	Alzheimer's Unit No
ARNOLD	MO 63010-4644	Level of Care: SNF	Bed Capacity 153
Mailing Address 1101 WEST OUTER 2		County JEFFERSON	DMH Licensed No
ARNOLD	MO 63010-4644		Facility Number 03650
ARNOLD	MO 03010-4044	Region 2 Medicare/Medicaid	racinty Number 05050
SOUTH HAMPTON PLACE			
4700 BRANDON WOODS		<b>Telephone</b> (573) 874-3674	Alzheimer's Unit No
COLUMBIA	MO 65203-7169	Level of Care: SNF	Bed Capacity 100
Mailing Address 4700 BRANDON WO	ODS	County BOONE	DMH Licensed No
COLUMBIA	MO 65203-7169	Region 6 Medicare/Medicaid	Facility Number 19799
SOUTH HAVEN RESIDENTIAL CAR	RE CENTER, LLC		
10462 AIRPORT RD		<b>Telephone</b> (573) 438-4150	Alzheimer's Unit No
MINERAL POINT	MO 63660-9325	Level of Care: RCF*	<b>Bed Capacity</b> 20
Mailing Address 10462 AIRPORT RD		County WASHINGTON	DMH Licensed Yes
MINERAL POINT	MO 63660-9325	Region 2	Facility Number 10529
GOVERN DOWN A GGYGRED VIVIN	a ny 1145nya 1ny		
SOUTH POINTE - ASSISTED LIVING	G BY AMERICARE	T-11 (626) 220 0670	Al-ladanasia Tinik
5125 OLD HWY 100	MO (2000 2055	<b>Telephone</b> (636) 239-0670	Alzheimer's Unit Yes
WASHINGTON 5125 OLD HWW 100	MO 63090-3855	Level of Care: ALF**	Bed Capacity 72
Mailing Address 5125 OLD HWY 100	MO (2000 2055	County FRANKLIN	DMH Licensed No
WASHINGTON	MO 63090-3855	Region 6	Facility Number 13735
SOUTH VIEW HEALTH CARE, LLC	;		
951 CREAMERY ROAD		<b>Telephone</b> (417) 255-9322	Alzheimer's Unit No
WEST PLAINS	MO 65775-6052	Level of Care: RCF*	<b>Bed Capacity</b> 32
Mailing Address PO BOX 88		County HOWELL	DMH Licensed Yes
WEST PLAINS	MO 65775-0088	Region 1	Facility Number 23567
COLUDITA VIEN			
SOUTHAVEN 612 SOUTH BYPASS EAST		<b>Telephone</b> (573) 888-9213	Alzheimer's Unit No
KENNETT	MO 63857-3240	Level of Care: RCF*	Bed Capacity 36
Mailing Address 612 SOUTH BYPASS		County DUNKLIN	DMH Licensed No
KENNETT	MO 63857-3240	·	Facility Number 24336
INDIVIDED I	1V1O 03037-3240	Region 2	Facility Number 24330

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SOUTHBROOK - SKILLED NURSIN	NG BY AMERICARE		
1108 WEST LIBERTY		<b>Telephone</b> (573) 756-6658	Alzheimer's Unit No
FARMINGTON	MO 63640-1922	Level of Care: SNF	<b>Bed Capacity</b> 104
Mailing Address 1108 WEST LIBERT		County SAINT FRANCOIS	<b>DMH Licensed</b> No
FARMINGTON	MO 63640-1922	Region 2 Medicare/Medicaid	Facility Number 02577
SOUTHGATE LIVING CENTER			
500 TRUMAN BLVD		<b>Telephone</b> (573) 333-5150	Alzheimer's Unit No
CARUTHERSVILLE	MO 63830-1261	Level of Care: SNF	<b>Bed Capacity</b> 94
Mailing Address 500 TRUMAN BLVI		County PEMISCOT	<b>DMH Licensed</b> No
CARUTHERSVILLE	MO 63830-1261	Region 2 Medicare/Medicaid	Facility Number 01081
SOUTHSIDE TOWNE HOUSE		T-l-nh (572) 591 2202	Al-Resissant Tiest
510 SOUTH WASHINGTON	MO (52(5 279)	Telephone (573) 581-3203 Level of Care: RCF*	Alzheimer's Unit No Bed Capacity 12
MEXICO	MO 65265-2786		
Mailing Address PO BOX 6	MO (52(5,000)	County AUDRAIN	
MEXICO	MO 65265-0006	Region 5	Facility Number 16987
SOUTHVIEW ASSISTED LIVING			
9916 REAVIS ROAD		<b>Telephone</b> (314) 544-4440	Alzheimer's Unit Yes
AFFTON	MO 63123-5314	Level of Care: ALF**	Bed Capacity 116
Mailing Address 9916 REAVIS RD		County SAINT LOUIS COUNTY	DMH Licensed No
AFFTON	MO 63123-5314	Region 7	Facility Number 28446
		Region	20110
SPECIAL FORCE FAMILY MINIST	TRIES		
428 SOUTH HARRISON ST		<b>Telephone</b> (417) 725-7917	Alzheimer's Unit No
NIXA	MO 65714-7809	Level of Care: RCF	Bed Capacity 12
Mailing Address PO BOX 882		County CHRISTIAN	<b>DMH Licensed</b> Yes
NIXA	MO 65714-0882	Region 1	Facility Number 18764
SPENCER PLACE - ASSISTED LIV	INC DV AMEDICADE		
265 SPENCER RD	ING BY AMERICARE	<b>Telephone</b> (636) 441-6662	Alzheimer's Unit No
SAINT PETERS	MO 63376-2430	Level of Care: ALF**	Bed Capacity 74
Mailing Address 265 SPENCER RD	WO 03370-2430	County SAINT CHARLES	DMH Licensed No
SAINT PETERS	MO 63376-2430	Region 5	Facility Number 13294
J.M.(T.E.TEKS	MO 03370 2130	Region 5	Tuentey Number 13274
SPRING MANOR			
3610 PALM ST		<b>Telephone</b> (314) 533-3111	Alzheimer's Unit No
SAINT LOUIS	MO 63107-2505	Level of Care: ALF**	<b>Bed Capacity</b> 94
Mailing Address 3610 PALM ST		County SAINT LOUIS CITY	<b>DMH Licensed</b> Yes
SAINT LOUIS	MO 63107-2505	Region 7	Facility Number 28552
annua nun an i aaramma	a ny		
SPRING RIDGE - ASSISTED LIVIN	G BY AMERICARE	Tolonhone (417) 990 7100	Alabaimania IInii
2828 SOUTH MEADOWBROOK	MO 65907 5025	Telephone (417) 889-7100	Alzheimer's Unit No
SPRINGFIELD  Moiling Address 2828 SOLITH MEAD	MO 65807-5925	Level of Care: ALF**	Bed Capacity 44
Mailing Address 2828 SOUTH MEAD		County GREENE	DMH Licensed No
SPRINGFIELD	MO 65807-5925	Region 1	Facility Number 19713

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CARDING PAYER CANDICATION OF	A CP. DVC		
SPRING RIVER CHRISTIAN VILLA	AGE, INC	F. I. I. (415) 622 4212	
201 S NORTHPARK LN	MO (1001 040)	<b>Telephone</b> (417) 623-4313	Alzheimer's Unit No
JOPLIN	MO 64801-8426	Level of Care: ALF**	Bed Capacity 93
Mailing Address 201 S NORTHPARK		County JASPER	DMH Licensed No
JOPLIN	MO 64801-8426	Region 1	Facility Number 14251
SPRING RIVER CHRISTIAN VILLA	ACE INC		
201 S NORTHPARK LN	IGE, IIIC	<b>Telephone</b> (417) 623-4313	Alzheimer's Unit No
JOPLIN	MO 64801-8426	Level of Care: SNF	Bed Capacity 120
Mailing Address 201 S NORTHPARK		County JASPER	DMH Licensed No
JOPLIN	MO 64801-8426	Region 1 Medicare/Medicaid	Facility Number 14251
			•
SPRING VALLEY ASSISTED LIVIN	NG		
2915 SOUTH FREMONT AVE		<b>Telephone</b> (417) 883-4022	Alzheimer's Unit No
SPRINGFIELD	MO 65804-3608	Level of Care: ALF	<b>Bed Capacity</b> 40
Mailing Address 2915 SOOUTH FREM	MONT AVE	County GREENE	<b>DMH Licensed</b> No
SPRINGFIELD	MO 65804-3608	Region 1	Facility Number 00144
CDDING WALLEY HEALTH & DEH	A DILLYTA TILON, CENTEED		
SPRING VALLEY HEALTH & REH	ABILITATION CENTER	T. 1	
2915 SOUTH FREMONT AVE SPRINGFIELD	MO (5904 2609	Telephone (417) 883-4022 Level of Care: SNF	Alzheimer's Unit Yes Bed Capacity 194
Mailing Address 2915 SOUTH FREM	MO 65804-3608		
SPRINGFIELD	MO 65804-3608		
SERINGFIELD	MO 03004-3006	Region 1 Medicare/Medicaid	Facility Number 00144
SPRINGFIELD REHABILITATION	& HEALTH CARE CENTER		
2800 S FORT AVE		<b>Telephone</b> (417) 882-0035	Alzheimer's Unit No
SPRINGFIELD	MO 65807-3480	Level of Care: SNF	<b>Bed Capacity</b> 146
Mailing Address PO BOX 3438 GS		County GREENE	<b>DMH Licensed</b> No
SPRINGFIELD	MO 65808-3438	Region 1 Medicare/Medicaid	Facility Number 07460
SPRINGFIELD SKILLED CARE CE	NTER		
2401 W GRAND ST	IVIER	<b>Telephone</b> (417) 864-4545	Alzheimer's Unit No
SPRINGFIELD	MO 65802-4967	Level of Care: SNF	Bed Capacity 120
Mailing Address 2401 W GRAND ST	112 03002 1707	County GREENE	DMH Licensed No
SPRINGFIELD	MO 65802-4967	Region 1 Medicare/Medicaid	Facility Number 09756
SPRINGFIELD VILLA			
1100 EAST MONTCLAIR		<b>Telephone</b> (417) 569-1114	Alzheimer's Unit Yes
SPRINGFIELD	MO 65807-5076	Level of Care: SNF	<b>Bed Capacity</b> 146
Mailing Address 1100 EAST MONTC		County GREENE	<b>DMH Licensed</b> No
SPRINGFIELD	MO 65807-5076	Region 1 Medicare/Medicaid	Facility Number 05280
SPRINGHOUSE VILLAGE EAST, L	LC		
3877 EAST FARM ROAD 132		<b>Telephone</b> (417) 877-1717	Alzheimer's Unit Yes
SPRINGFIELD	MO 65802-	Level of Care: ALF**	<b>Bed Capacity</b> 100
Mailing Address 3877 EAST FARM R	OAD 132	County GREENE	DMH Licensed No
SPRINGFIELD	MO 65802-	Region 1	Facility Number 32469

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ST AGNES HOME				
10341 MANCHESTER RD	Telepho		Alzheimer's Unit	No
	3122-1520 Level of		Bed Capacity	150
Mailing Address 10341 MANCHESTER RD	County	SAINT LOUIS COUNTY	DMH Licensed	No
KIRKWOOD MO 6	3122-1520 <b>Region</b>	7	Facility Number	07481
ST ANDREW'S ASSISTED LIVING OF BRID	CETON			
11325 ST CHARLES ROCK RD	Telepho	ne (314) 209-1177	Alzheimer's Unit	No
	3044-2722 <b>Level o</b>			35
Mailing Address 11325 ST CHARLES ROCK R		SAINT LOUIS COUNTY	Bed Capacity DMH Licensed	No
	·			
BRIDGETON MO 0	3044-2722 <b>Region</b>	1	Facility Number	22810
ST ANDREW'S AT FRANCIS PLACE				
400 SUMMERVILLE BLVD	Telepho	ne (636) 938-5151	Alzheimer's Unit	No
EUREKA MO 6	3025-2316 Level of	Care: SNF	<b>Bed Capacity</b>	106
Mailing Address 400 SUMMERVILLE BLVD	County	SAINT LOUIS COUNTY	DMH Licensed	No
	3025-2316 Region	7 Medicare/Medicaid	Facility Number	06430
ST ANDREW'S AT NEW FLORENCE				
515 PICNIC ST	Telepho		Alzheimer's Unit	No
	3363-2223 Level of		Bed Capacity	33
Mailing Address 515 PICNIC ST	County	MONTGOMERY	DMH Licensed	No
NEW FLORENCE MO 6	3363-2223 Region	6	Facility Number	05723
ST ANDREW'S AT NEW FLORENCE				
515 PICNIC ST	Telepho	ne (573) 415-9333	Alzheimer's Unit	No
	3363-2223 Level of	` '	Bed Capacity	87
Mailing Address 515 PICNIC ST	County	MONTGOMERY	DMH Licensed	No
	3363-2223 <b>Region</b>	6 Medicare/Medicaid	Facility Number	05723
ST ANN ASSISTED LIVING CENTER 10441 INTERNATIONAL PLAZA DR	Tolombo	ma (214) 422 1254	Alahaiman'a Unit	No
	Telepho 3074-1805 Level of	, ,	Alzheimer's Unit Bed Capacity	No 40
Mailing Address 10441 INTERNATIONAL PLA			DMH Licensed	No
	3074-1805 Region		Facility Number	21994
SAINT ANN WO 0	3074-1803 <b>Region</b>	,	racinty Number	21994
ST ANTHONY'S				
1010 EAST 68TH STREET	Telepho	ne 816-866-8727	Alzheimer's Unit	No
KANSAS CITY MO 6	4131- Level of	Care: ALF**	<b>Bed Capacity</b>	49
Mailing Address 1010 EAST 68TH STREET	County	JACKSON	<b>DMH Licensed</b>	No
KANSAS CITY MO 6	4131- Region	3	Facility Number	32075
ST CLAIR NURSING CENTER				
1035 PLAZA COURT NORTH	Telepho	ne (636) 629-2100	Alzheimer's Unit	No
	3077-1129 <b>Level o</b>		Bed Capacity	79
Mailing Address 1035 PLAZA CT NORTH	County	FRANKLIN	DMH Licensed	No
	3077-1129 <b>Region</b>		Facility Number	13744
	Kegion	- Micuical Civicuicalu		13/44

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ST ELIZABETH CARE CENTER			
649 SOUTH WALNUT ST		<b>Telephone</b> (573) 493-2215	Alzheimer's Unit No
SAINT ELIZABETH Me	O 65075-2440	Level of Care: SNF	<b>Bed Capacity</b> 63
Mailing Address 649 SOUTH WALNUT ST	Γ	County MILLER	<b>DMH Licensed</b> No
SAINT ELIZABETH Me	O 65075-2440	Region 6 Medicare/Medicaid	Facility Number 07523
ST ELIZABETH HALL			
325 NORTH NEWSTEAD AVE		<b>Telephone</b> (314) 652-9525	Alzheimer's Unit No
SAINT LOUIS Me	O 63108-2707	Level of Care: ALF**	Bed Capacity 50
Mailing Address 325 N NEWSTEAD AVE	:	County SAINT LOUIS CITY	DMH Licensed Yes
SAINT LOUIS Me	O 63108-2707	Region 7	Facility Number 07516
ST FRANCIS PARK - ASSISTED LIVING	G BY AMERICARE		
1806 SAINT FRANCIS ST		<b>Telephone</b> (573) 888-1188	Alzheimer's Unit No
	O 63857-1568	Level of Care: ALF**	Bed Capacity 50
Mailing Address PO BOX 629		County DUNKLIN	DMH Licensed No
•	O 63857-0629	Region 2	Facility Number 18903
122.11.211	0 00007 0027	Region -	10,05
STE ED ANGOIS MANOD			
ST FRANCOIS MANOR		W. I. I. (572) 760 1700	A11
1180 OLD JACKSON RD	0 (2(40 2429	<b>Telephone</b> (573) 760-1700	Alzheimer's Unit No
	O 63640-3428	Level of Care: RCF*	Bed Capacity 29
Mailing Address 1180 OLD JACKSON RD		County SAINT FRANCOIS	DMH Licensed Yes
FARMINGTON Me	O 63640-3428	Region 2	Facility Number 21512
ST FRANCOIS MANOR			
1180 OLD JACKSON RD		<b>Telephone</b> (573) 760-1700	Alzheimer's Unit No
	O 63640-3428	Level of Care: RCF	Bed Capacity 11
Mailing Address 1180 OLD JACKSON RD		County SAINT FRANCOIS	<b>DMH Licensed</b> Yes
FARMINGTON Me	O 63640-3428	Region 2	Facility Number 21512
ST FRANCOIS MANOR			
1180 OLD JACKSON RD		<b>Telephone</b> (573) 760-1700	Alzheimer's Unit No
	O 63640-3428	Level of Care: SNF	<b>Bed Capacity</b> 118
Mailing Address 1180 OLD JACKSON RD		County SAINT FRANCOIS	<b>DMH Licensed</b> No
FARMINGTON Me	O 63640-3428	Region 2 Medicare/Medicaid	Facility Number 21512
ST GENEVIEVE CARE CENTER, INC			
1010 STE GENEVIEVE DR		<b>Telephone</b> (573) 883-5725	Alzheimer's Unit No
SAINTE GENEVIEVE Me	O 63670-1447	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address PO BOX 426		County SAINTE GENEVIEVE	DMH Licensed No
SAINTE GENEVIEVE Me	O 63670-0426	Region 2 Medicare/Medicaid	Facility Number 03254
ST JAMES LIVING CENTER			
415 SIDNEY ST		<b>Telephone</b> (573) 265-8921	Alzheimer's Unit Yes
	O 65559-1070	Level of Care: SNF	<b>Bed Capacity</b> 90
Mailing Address PO BOX 69		County PHELPS	<b>DMH Licensed</b> No
SAINT JAMES Me	O 65559-0069	Region 6 Medicare/Medicaid	Facility Number 05238

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ST JOE MANOR				_
10 LAKE DR	MO 50500 1000	<b>Telephone</b> (573) 358-2800		No oz
BONNE TERRE	MO 63628-1820	Level of Care: SNF		35
Mailing Address 10 LAKE DR	MO (2(29 1920	County SAINT FRANCOIS		No
BONNE TERRE	MO 63628-1820	Region 2 Medicare/Medicaid	Facility Number 2266	54
ST JOE MANOR				
10 LAKE DR		<b>Telephone</b> (573) 358-2800	Alzheimer's Unit Y	es
BONNE TERRE	MO 63628-1820	Level of Care: ALF		10
Mailing Address 10 LAKE DR	110 00020 1020	County SAINT FRANCOIS	_ · · · · · · · · · · · · · · · · · · ·	No
BONNE TERRE	MO 63628-1820	Region 2	Facility Number 2266	
		1109.01	2200	
ST JOE MANOR				
10 LAKE DR		<b>Telephone</b> (573) 358-2800	Alzheimer's Unit	No
BONNE TERRE	MO 63628-1820	Level of Care: ALF**	Bed Capacity	36
Mailing Address 10 LAKE DR		County SAINT FRANCOIS	DMH Licensed	No
BONNE TERRE	MO 63628-1820	Region 2	Facility Number 2266	54
am vovvva nv 1 a-				
ST JOHNS PLACE				
3333 BROWN ROAD	MO (2114 4227	<b>Telephone</b> (314) 426-2211		No o4
SAINT LOUIS	MO 63114-4327	Level of Care: SNF	p	94
Mailing Address 3333 BROWN RD SAINT LOUIS	MO 63114-4327	County SAINT LOUIS COUNTY		No 51
SAINI LOUIS	MO 03114-4327	Region 7 Medicare/Medicaid	Facility Number 1845	54
ST JOSEPH CHATEAU				
811 NORTH 9TH ST		<b>Telephone</b> (816) 233-5164	Alzheimer's Unit	No
SAINT JOSEPH	MO 64501-1651	Level of Care: SNF	Bed Capacity	69
Mailing Address 811 NORTH 9TH ST		County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64508-1651	Region 4 Medicare/Medicaid	Facility Number 0753	32
CT LOCEDIA CENTOD I WING				
ST JOSEPH SENIOR LIVING 1317 NORTH 36TH ST		<b>Telephone</b> (816) 676-1630	Alzheimer's Unit	No
SAINT JOSEPH	MO 64506-2359	Level of Care: SNF		10
Mailing Address 1317 N 36TH ST	1410 04300-2337	County BUCHANAN		No
SAINT JOSEPH	MO 64506-2359	Region 4 Medicare/Medicaid	Facility Number 0052	
	110 01000 2009	region . Wedicare/Medicard	1401109 1 (411100)	-0
ST JOSEPH'S BLUFFS				
1306 WEST MAIN ST		<b>Telephone</b> (573) 635-0166	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-1356	Level of Care: SNF		69
Mailing Address 1306 WEST MAIN ST		County COLE		No
JEFFERSON CITY	MO 65109-1356	Region 6 Medicare/Medicaid	Facility Number 0757	72
ST LOUIS ALTENHEIM				
5408 SOUTH BROADWAY		<b>Telephone</b> (314) 353-7225	Alzheimer's Unit	No
SAINT LOUIS	MO 63111-2023	Level of Care: SNF		24
Mailing Address 5408 SOUTH BROAL	OWAY	County SAINT LOUIS CITY		No
SAINT LOUIS	MO 63111-2023	Region 7 Medicaid	Facility Number 0758	85

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ST LOUIS ALTENHEIM					
5408 SOUTH BROADWAY		Telephone	(314) 353-7225	Alzheimer's Unit	No
	O 63111-2023	Level of Care:	ICF	Bed Capacity	24
Mailing Address 5408 S BROADWAY			INT LOUIS CITY	DMH Licensed	No
· ·	O 63111-2023	Region 7		Facility Number	07585
		8		·	
ST LOUIS ALTENHEIM					
5408 SOUTH BROADWAY		Telephone	(314) 353-7225	Alzheimer's Unit	Yes
	O 63111-2023	Level of Care:	ALF**	Bed Capacity	23
Mailing Address 5408 SOUTH BROADWA			INT LOUIS CITY	DMH Licensed	No
SAINT LOUIS MO	O 63111-2023	Region 7		Facility Number	07585
ST LOUIS HILLS ASSISTED LIVING AN	ID MEMORY CARE				
6543 CHIPPEWA ST	-	Telephone	(314) 647-6600	Alzheimer's Unit	Yes
SAINT LOUIS MO	O 63109-4100	Level of Care:	ALF**	Bed Capacity	181
Mailing Address 6543 CHIPPEWA ST		County SA	INT LOUIS CITY	DMH Licensed	No
	O 63109-4100	Region 7		Facility Number	07594
CE I OTIC DI ACE HEAT THE O DEWARD	THE ATTRON				
ST LOUIS PLACE HEALTH & REHABII 2600 REDMAN RD	LITATION	T-1	(214) 255 9595	Alzheimer's Unit	No
	O 63136-5863	Telephone Level of Care:	(314) 355-8585 SNF	Bed Capacity	120
Mailing Address 2600 REDMAN RD	9 03130-3803		INT LOUIS COUNTY	DMH Licensed	No
_	O 63136-5863	_	Medicare/Medicaid	Facility Number	18697
	3 00100 0000	Region /	viculai e/ viculaid	Tuemey (vamoer	10077
ST LUKE'S CARE CENTER, INC					
1220 EAST FAIRVIEW AVE		Telephone	(417) 358-9084	Alzheimer's Unit	No
	O 64836-3122	Level of Care:	ALF**	Bed Capacity	41
Mailing Address 1220 EAST FAIRVIEW A		·	SPER	DMH Licensed	No
CARTHAGE MO	O 64836-3122	Region 1		Facility Number	07606
ST LUKE'S NURSING CENTER, INC					
1220 EAST FAIRVIEW AVE		Telephone	(417) 358-9084	Alzheimer's Unit	Yes
CARTHAGE MO	O 64836-3122	Level of Care:	SNF	Bed Capacity	95
Mailing Address 1220 EAST FAIRVIEW A	VE	County JAS	SPER	DMH Licensed	No
CARTHAGE MO	O 64836-3122	Region 1	Medicare/Medicaid	Facility Number	07606
ST PETERS MANOR CARE CENTER					
230 SPENCER RD		Telephone	(636) 441-2750	Alzheimer's Unit	NO
SAINT PETERS MO	O 63376-2425	Level of Care:	SNF	Bed Capacity	96
Mailing Address 230 SPENCER RD		County SA	INT CHARLES	DMH Licensed	No
	O 63376-2425	·	Medicare/Medicaid	Facility Number	07613
ST SOPHIA HEALTH & REHABILITAT	ION CENTER				
936 CHARBONIER RD	LOI, CHILLIAN	Telephone	(314) 831-4800	Alzheimer's Unit	No
	O 63031-5220	Level of Care:	SNF	Bed Capacity	240
Mailing Address 936 CHARBONIER RD			INT LOUIS COUNTY	DMH Licensed	No
	O 63031-5220	Region 7	Medicare/Medicaid	Facility Number	07631

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STAR CARE			
1606 SOUTH 38TH ST		<b>Telephone</b> (816) 390-8941	Alzheimer's Unit No
SAINT JOSEPH	MO 64507-2216	Level of Care: RCF	<b>Bed Capacity</b> 18
Mailing Address PO BOX 8923		County BUCHANAN	<b>DMH Licensed</b> Yes
SAINT JOSEPH	MO 64508-8923	Region 4	Facility Number 00920
STEELVILLE SENIOR LIVING			
311 NORTH SPRING ST		<b>Telephone</b> (573) 260-8850	Alzheimer's Unit No
STEELVILLE	MO 65565-5089	Level of Care: ALF	Bed Capacity 21
Mailing Address 311 NORTH SPRING	G ST	County CRAWFORD	DMH Licensed No
STEELVILLE	MO 65565-5089	Region 6	Facility Number 02860
STEELVILLE SENIOR LIVING			
311 NORTH SPRING ST		<b>Telephone</b> (573) 260-8850	Alzheimer's Unit No
STEELVILLE	MO 65565-5089	Level of Care: SNF	<b>Bed Capacity</b> 72
Mailing Address 311 NORTH SPRING	G ST	County CRAWFORD	<b>DMH Licensed</b> No
STEELVILLE	MO 65565-5089	Region 6 Medicare/Medicaid	Facility Number 02860
STONEBRIDGE ADAMS STREET			
1024 ADAMS ST		<b>Telephone</b> (573) 635-1320	Alzheimer's Unit No
JEFFERSON CITY	MO 65101-3408	Level of Care: SNF	Bed Capacity 120
	MO 03101-3408		DMH Licensed No
Mailing Address 1024 ADAMS ST JEFFERSON CITY	MO 65101-3408		
JEFFERSON CIT I	WIO 03101-3408	Region 6 Medicare/Medicaid	Facility Number 01339
STONEBRIDGE CHILLICOTHE			
2601 FAIR ST		<b>Telephone</b> (660) 646-4123	Alzheimer's Unit No
CHILLICOTHE	MO 64601-3525	Level of Care: RCF*	Bed Capacity 40
Mailing Address 2601 FAIR ST		County LIVINGSTON	DMH Licensed No
CHILLICOTHE	MO 64601-3525	Region 4	Facility Number 03833
STONEBRIDGE CHILLICOTHE			
2601 FAIR ST		<b>Telephone</b> (660) 646-4123	Alzheimer's Unit No
CHILLICOTHE	MO 64601-3525	Level of Care: SNF	<b>Bed Capacity</b> 75
Mailing Address 2601 FAIR ST		County LIVINGSTON	<b>DMH Licensed</b> No
CHILLICOTHE	MO 64601-3525	Region 4 Medicare/Medicaid	Facility Number 03833
STONEDDIDGE DESOTO			
STONEBRIDGE DESOTO		T-lank (626) 596 6550	Allahatan U. V. M.
1550 VILLAS DR	NO 62020 2506	<b>Telephone</b> (636) 586-6559	Alzheimer's Unit No
DE SOTO	MO 63020-2586	Level of Care: SNF	Bed Capacity 56
Mailing Address 1550 VILLAS DR	MO (2000 250)	County JEFFERSON	DMH Licensed No
DE SOTO	MO 63020-2586	Region 2 Medicare/Medicaid	Facility Number 13501
STONEBRIDGE DESOTO			
1550 VILLAS DR		<b>Telephone</b> (636) 586-6559	Alzheimer's Unit No
DE SOTO	MO 63020-2586	Level of Care: RCF*	Bed Capacity 80
Mailing Address 1550 VILLAS DR		County JEFFERSON	DMH Licensed No
DE SOTO	MO 63020-2586	Region 2	Facility Number 13501
		<i>a</i> -	•

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STONEBRIDGE FLORISSANT			
6768 NORTH HIGHWAY 67	<b>Telephone</b> (314) 741-9101	Alzheimer's Unit	No
FLORISSANT MO 63034-2742	Level of Care: SNF	Bed Capacity	120
Mailing Address 6768 NORTH HWY 67	County SAINT LOUIS COUNTY	DMH Licensed	No
FLORISSANT MO 63034-2742	Region 7 Medicare/Medicaid	Facility Number	14200
STONEBRIDGE HERMANN			
1800 WEIN ST	<b>Telephone</b> (573) 486-3155	Alzheimer's Unit	No
HERMANN MO 65041-1601	Level of Care: SNF	Bed Capacity	118
Mailing Address PO BOX 468	County GASCONADE	DMH Licensed	No
HERMANN MO 65041-0468	Region 6 Medicare/Medicaid	Facility Number	02690
	region o medicare/medicare	Tuesday Tuesday	02070
STONEBRIDGE HERMANN			
1800 WEIN ST	<b>Telephone</b> (573) 486-3155	Alzheimer's Unit	No
HERMANN MO 65041-1601	Level of Care: ALF	<b>Bed Capacity</b>	18
Mailing Address PO BOX 468	County GASCONADE	DMH Licensed	No
HERMANN MO 65041-0468	Region 6	Facility Number	02690
STONEBRIDGE LAKE OZARK			
872 COLLEGE BLVD	<b>Telephone</b> (573) 302-0900	Alzheimer's Unit	No
OSAGE BEACH MO 65065-8408	Level of Care: RCF*	Bed Capacity	40
Mailing Address 872 COLLEGE BLVD	County MILLER	DMH Licensed	No
OSAGE BEACH MO 65065-8408	Region 6	Facility Number	20926
CTONERDID CE LAVE OZADY			
STONEBRIDGE LAKE OZARK 872 COLLEGE BLVD	Talanhana (572) 202 0000	Alzheimer's Unit	No
OSAGE BEACH MO 65065-8408	Telephone (573) 302-0900 Level of Care: SNF		66
Mailing Address 872 COLLEGE BLVD	County MILLER	Bed Capacity DMH Licensed	No
OSAGE BEACH MO 65065-8408	Region 6 Medicare/Medicaid	Facility Number	20926
OSAGE BEACH MO 05005-0400	Region 6 Medical e/Medicalu	racinty Number	20920
STONEBRIDGE MARBLE HILL			
702 HIGHWAY 34 WEST	<b>Telephone</b> (573) 238-2614	Alzheimer's Unit	No
MARBLE HILL MO 63764-4301	Level of Care: SNF	<b>Bed Capacity</b>	98
Mailing Address 702 HWY 34 WEST	County BOLLINGER	DMH Licensed	No
MARBLE HILL MO 63764-4301	Region 2 Medicare/Medicaid	Facility Number	10864
STONEBRIDGE MARYLAND HEIGHTS			
2963 DODDRIDGE AVE	<b>Telephone</b> (314) 291-4557	Alzheimer's Unit	No
MARYLAND HEIGHTS MO 63043-1736	Level of Care: SNF	Bed Capacity	223
Mailing Address 2963 DODDRIDGE AVE	County SAINT LOUIS COUNTY	DMH Licensed	No
MARYLAND HEIGHTS MO 63043-1736	Region 7 Medicare/Medicaid	Facility Number	00855
STONEBRIDGE OAK TREE			
3108 WEST TRUMAN BLVD	<b>Telephone</b> (573) 893-3063	Alzheimer's Unit	No
JEFFERSON CITY MO 65109-4918	Level of Care: ALF	Bed Capacity	80
Mailing Address 3108 WEST TRUMAN BLVD	County COLE	DMH Licensed	No
JEFFERSON CITY MO 65109-4918	Region 6	Facility Number	10300
	- <del></del>	•	

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CTONERRINGE OAK TREE				
STONEBRIDGE OAK TREE	Telephone	(572) 902 2072	A 1-1	NI.
3108 WEST TRUMAN BLVD JEFFERSON CITY MO 6	55109-4918 Level of Ca	(573) 893-3063 re: SNF	Alzheimer's Unit Bed Capacity	No 42
Mailing Address 3108 WEST TRUMAN BLVD		COLE	DMH Licensed	No
_			Facility Number	10300
JEFFERSON CITT MO 0	55109-4918 <b>Region</b> 6	Medicare	racinty Number	10300
STONEBRIDGE OWENSVILLE				
1016 W HIGHWAY 28	Telephone	(573) 437-6877	Alzheimer's Unit	Yes
OWENSVILLE MO 6	55066-1677 Level of Ca	re: SNF	Bed Capacity	131
Mailing Address PO BOX 593	County	GASCONADE	DMH Licensed	No
_	55066-0593 <b>Region</b> 6	Medicare/Medicaid	Facility Number	19051
STONEBRIDGE VILLA MARIE				
1030 EDMONDS ST	Telephone	(573) 635-3381	Alzheimer's Unit	Yes
	55109-5213 Level of Ca	` '	Bed Capacity	120
Mailing Address 1030 EDMONDS ST	County	COLE	DMH Licensed	No
	55109-5213 <b>Region</b> 6	Medicare/Medicaid	Facility Number	08282
VELTERBOTT INC.	Kegion v	wedicar c/wedicard	Tuesing Tuniber	00202
STONEBRIDGE WESTPHALIA				
1899 HIGHWAY 63	Telephone	(573) 455-2280	Alzheimer's Unit	No
WESTPHALIA MO 6	55085-2215 Level of Ca	re: RCF*	Bed Capacity	28
Mailing Address 1899 HWY 63	County	OSAGE	DMH Licensed	No
WESTPHALIA MO 6	55085-2215 <b>Region</b> 6		Facility Number	18653
STONEBRIDGE WESTPHALIA				
1899 HIGHWAY 63	Telephone	(573) 455-2280	Alzheimer's Unit	No
	55085-2215 Level of Ca	` '	Bed Capacity	64
Mailing Address 1899 HWY 63	County	OSAGE	DMH Licensed	No
	55085-2215 <b>Region</b> 6	Medicare/Medicaid	Facility Number	18653
STONECREST HEALTHCARE				
2 HIGHWAY Y	Telephone	(573) 244-3171	Alzheimer's Unit	No
	55566-0707 Level of Ca	` '	Bed Capacity	60
Mailing Address PO BOX 707	County	IRON	DMH Licensed	No
	55566-0707 <b>Region</b> 2	Medicare/Medicaid	Facility Number	16689
			•	
STONEY RIDGE VILLAGE				
25023 BOTHWELL PARK RD	Telephone	(660) 827-3993	Alzheimer's Unit	No
	55301-0084 Level of Ca		Bed Capacity	81
Mailing Address 25023 BOTHWELL PARK RI	*	PETTIS	DMH Licensed	No
SEDALIA MO 6	55301-0084 <b>Region</b> 6		Facility Number	05035
STOVER'S RESIDENTIAL CARE FACILITY	Y			
520 EAST 5TH ST	Telephone	(660) 265-3262	Alzheimer's Unit	No
MILAN MO 6	3556-1222 Level of Ca	re: RCF	<b>Bed Capacity</b>	20
Mailing Address 520 EAST 5TH ST	County	SULLIVAN	DMH Licensed	Yes
MILAN MO 6	Region 5		Facility Number	07709

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STRAFFORD CARE CENTER				
505 WEST EVERGREEN		<b>Telephone</b> (417) 736-9332	Alzheimer's Unit	Yes
STRAFFORD	MO 65757-8625	Level of Care: SNF	Bed Capacity	78
Mailing Address 505 WEST EVERGR	EEN	County GREENE	DMH Licensed	No
STRAFFORD	MO 65757-8625	Region 1 Medicare/Medicaid	Facility Number	21285
			•	
STUART HOUSE, LLC THE				
117 S HICKMAN		<b>Telephone</b> (573) 682-3204	Alzheimer's Unit	No
CENTRALIA	MO 65240-1316	Level of Care: ICF		27
	MO 03240-1310		Bed Capacity	
Mailing Address 117 S HICKMAN	140 (5240 1216	County BOONE	DMH Licensed	No
CENTRALIA	MO 65240-1316	Region 6	Facility Number	10146
CTUDDI EEIEI N DETIDEMENT HA	)ME			
STUBBLEFIELD RETIREMENT HO 5349 HIGHWAY P	OME	Telephone (572) 995 2661	Alahaiman'a Unit	Mo
	MO 65452 6201	<b>Telephone</b> (573) 885-3661	Alzheimer's Unit	No
CUBA	MO 65453-6281	Level of Care: RCF*	Bed Capacity	34
Mailing Address PO BOX 647		County CRAWFORD	DMH Licensed	Yes
CUBA	MO 65453-0647	Region 6	Facility Number	17894
STURGEON RESIDENTIAL CARE				
315 E STONE ST		<b>Telephone</b> (573) 687-3012	Alzheimer's Unit	No
	MO 65294 9007	· · · · · · · · · · · · · · · · · · ·		20
STURGEON	MO 65284-8907	Level of Care: RCF	Bed Capacity	
Mailing Address PO BOX 328		County BOONE	DMH Licensed	No
STURGEON	MO 65284-0328	Region 6	Facility Number	07733
SUGAR CREEK - ASSISTED LIVIN	G RY AMERICARE			
161 PROFESSIONAL PARKWAY	O 2 1 12012201201	<b>Telephone</b> (636) 528-3136	Alzheimer's Unit	Yes
TROY	MO 63379-2829	Level of Care: ALF**	Bed Capacity	60
Mailing Address 161 PROFESSIONAI		County LINCOLN	DMH Licensed	No
TROY	MO 63379-2829	•		
IROI	MO 03379-2829	Region 5	Facility Number	26349
SUMMIT VILLA LIFECARE				
229 KAREN DR		<b>Telephone</b> (573) 896-8567	Alzheimer's Unit	Yes
HOLTS SUMMIT	MO 65043-2522	Level of Care: ALF**	Bed Capacity	50
Mailing Address 229 KAREN DR	110 03043 2322	County CALLAWAY	DMH Licensed	No
	MO 65042 2522			
HOLTS SUMMIT	MO 65043-2522	Region 6	racinty Number	21318
SUMMIT, THE				
3660 SUMMIT		<b>Telephone</b> (816) 931-1196	Alzheimer's Unit	No
KANSAS CITY	MO 64111-4632	Level of Care: SNF	Bed Capacity	64
Mailing Address 3660 SUMMIT		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64111-4632	·		18330
KANSAS CII I	1710 UH111"HUJZ	Region 3 Medicare/Medicaid	racinty number	10230
SUMMITVIEW TERRACE ASSISTI	ED LIVING BY AMERICARE			
12101 EAST BANNISTER RD		<b>Telephone</b> (816) 763-6667	Alzheimer's Unit	No
KANSAS CITY	MO 64138-4913	Level of Care: ALF**	Bed Capacity	52
Mailing Address 12101 EAST BANNI		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64138-4913	Region 3		16311
· · · · · · · · · · · · · · · · · · ·				- 0011

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SUNNY MEADOWS LIVING CENTE	ER		
419 NORTH PROSPECT AVE		<b>Telephone</b> (660) 826-5353	Alzheimer's Unit No
SEDALIA	MO 65301-2729	Level of Care: RCF	<b>Bed Capacity</b> 12
Mailing Address 419 N PROSPECT A		County PETTIS	<b>DMH Licensed</b> Yes
SEDALIA	MO 65301-2729	Region 6	Facility Number 06527
SUNNYHILL INDEPENDENCE CEN	VTER		
3343 ARMBRUSTER ROAD		<b>Telephone</b> (636) 586-2188	Alzheimer's Unit No
DE SOTO	MO 63020-4506	Level of Care: ALF**	<b>Bed Capacity</b> 32
Mailing Address 3343 ARMBRUSTER	RRD	County JEFFERSON	<b>DMH Licensed</b> Yes
DE SOTO	MO 63020-4506	Region 2	Facility Number 29674
CHANNING DECIDENTIAL CARE	EACH VOV		
SUNNYHILL RESIDENTIAL CARE 134 GRAY ST	FACILITY	<b>Telephone</b> (636) 931-4701	Alzheimer's Unit No
FESTUS	MO 63028-1949	Level of Care: RCF	
	MO 03028-1949	County JEFFERSON	Bed Capacity 20 DMH Licensed Yes
Mailing Address PO BOX 356 FESTUS	MO 63028-0356	·	
resius	MO 03028-0330	Region 2	Facility Number 07725
SUNNYHILLS RESIDENTIAL CARI	E FACILITY		
17562 IMPERIAL RD		<b>Telephone</b> (417) 358-6122	Alzheimer's Unit No
CARTHAGE	MO 64836-8753	Level of Care: RCF	Bed Capacity 18
Mailing Address 17562 IMPERIAL RD	)	County JASPER	DMH Licensed No
CARTHAGE	MO 64836-8753	Region 1	Facility Number 13351
SUNNYVIEW NURSING HOME & A	PARTMENTS		
1311 EAST 28TH ST		<b>Telephone</b> (660) 359-5647	Alzheimer's Unit No
TRENTON	MO 64683-1103	Level of Care: SNF	Bed Capacity 154
Mailing Address 1311 EAST 28TH ST		County GRUNDY	DMH Licensed No
TRENTON	MO 64683-1103	Region 4 Medicare/Medicaid	Facility Number 18509
SUNNYVIEW NURSING HOME & A	PARTMENTS		
1311 EAST 28TH ST		<b>Telephone</b> (660) 359-5647	Alzheimer's Unit No
TRENTON	MO 64683-1103	Level of Care: RCF*	<b>Bed Capacity</b> 38
Mailing Address 1311 EAST 28TH ST		County GRUNDY	<b>DMH Licensed</b> No
TRENTON	MO 64683-1103	Region 4	Facility Number 18509
SUNRISE OF CHESTERFIELD			
1880 CLARKSON RD		<b>Telephone</b> (636) 536-3800	Alzheimer's Unit Yes
CHESTERFIELD	MO 63017-5000	Telephone (636) 536-3800 Level of Care: ICF	
Mailing Address 1880 CLARKSON RI		County SAINT LOUIS COUNTY	Bed Capacity 95  DMH Licensed No
CHESTERFIELD	MO 63017-5000		
CHESTERFIELD	1v1O 03017-3000	Region 7	Facility Number 23767
SUNRISE OF CHESTERFIELD			
1880 CLARKSON RD		<b>Telephone</b> (636) 536-3800	Alzheimer's Unit No
CHESTERFIELD	MO 63017-5000	Level of Care: ALF**	<b>Bed Capacity</b> 3
Mailing Address 1880 CLARKSON RI	)	County SAINT LOUIS COUNTY	DMH Licensed No
CHESTERFIELD	MO 63017-5000	Region 7	Facility Number 23767

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SUNRISE OF DES PERES			
13460 MANCHESTER RD		<b>Telephone</b> (314) 965-3800	Alzheimer's Unit Yes
DES PERES	MO 63131-1734	Level of Care: ICF	Bed Capacity 102
Mailing Address 13460 MANCHESTE	R RD	County SAINT LOUIS COUNTY	DMH Licensed No
DES PERES	MO 63131-1734	Region 7	Facility Number 24242
SUNRISE OF WEBSTER GROVES			
45 EAST LOCKWOOD		<b>Telephone</b> (314) 918-7300	Alzheimer's Unit Yes
SAINT LOUIS	MO 63119-3050	Level of Care: ALF**	<b>Bed Capacity</b> 90
Mailing Address 45 EAST LOCKWOO	DD .	County SAINT LOUIS COUNTY	DMH Licensed No
SAINT LOUIS	MO 63119-3050	Region 7	Facility Number 28242
5.11.11 20015		Region /	Tuenty Number 20242
SUNRISE ON CLAYTON			
7920 CLAYTON ROAD		<b>Telephone</b> (314) 646-7600	Alzheimer's Unit Yes
RICHMOND HEIGHTS	MO 63117-1327	Level of Care: ICF	Bed Capacity 90
Mailing Address 7920 CLAYTON RD	WIO 03117-1327	County SAINT LOUIS COUNTY	DMH Licensed No
o .	MO (2117-1227		
RICHMOND HEIGHTS	MO 63117-1327	Region 7	Facility Number 24149
SUNSET HEALTH CARE CENTER			
400 WEST PARK AVE		<b>Telephone</b> (636) 583-2252	Al-Lainnant-Tinia No
	MO (2004 1140		Alzheimer's Unit No
UNION	MO 63084-1140	Level of Care: SNF	Bed Capacity 120
Mailing Address 400 WEST PARK AV		County FRANKLIN	DMH Licensed No
UNION	MO 63084-1140	Region 6 Medicare/Medicaid	Facility Number 07831
SUNSET HOME			
1201 SOUTH POLK		<b>Telephone</b> (816) 449-2158	Alzheimer's Unit No
MAYSVILLE	MO 64469-4028	Level of Care: SNF	Bed Capacity 60
	WIO 04409-4028		DMH Licensed No
Mailing Address 1201 S POLK	MO (4460 4029	·	
MAYSVILLE	MO 64469-4028	Region 4 Medicare/Medicaid	Facility Number 07798
SUNSHINE ACRES			
541 ROCK ROAD		<b>Telephone</b> (573) 732-5366	Alzheimer's Unit No
BOURBON	MO 65441-6324	Level of Care: RCF	Bed Capacity 20
Mailing Address PO BOX 67	110 03441-0324	County CRAWFORD	DMH Licensed Yes
BOURBON	MO 65441-0067	•	
DOURDON	MO 03441-0007	Region 6	Facility Number 03540
SUNSHINE HOME CARE - ST CHAI	RLES		
618 HEMSATH RD		<b>Telephone</b> (636) 947-7799	Alzheimer's Unit No
SAINT CHARLES	MO 63303-5919	Level of Care: RCF	Bed Capacity 27
Mailing Address 618 HEMSATH RD		County SAINT CHARLES	DMH Licensed Yes
SAINT CHARLES	MO 63303-5919	Region 5	Facility Number 08653
SAUVI CHARLES	1410 03303-3717	region 5	racinty runner 08053
SUNSHINE HOME CARE - WINFIE	LD		
499 WALNUT ST		<b>Telephone</b> (636) 668-8500	Alzheimer's Unit No
WINFIELD	MO 63389-1138	Level of Care: RCF	Bed Capacity 49
Mailing Address PO BOX 185		County LINCOLN	DMH Licensed Yes
WINFIELD	MO 63389-0185	Region 5	Facility Number 25266
	00007 0100	Acgion -	23200

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CUINCUITNIE VIII I A				
SUNSHINE VILLA 2520 JAMES ST		<b>Telephone</b> (573) 264-2424	Alahaiman'a Tinit	No
	MO (2790 1210	. ,	Alzheimer's Unit	No
SCOTT CITY	MO 63780-1219	Level of Care: ALF County SCOTT	Bed Capacity	26 Yes
Mailing Address 2520 JAMES ST	MO 63780-1219		DMH Licensed	
SCOTT CITY	MO 63/80-1219	Region 2	Facility Number 0	7039
SUNTERRA SPRINGS DARDENNE P	PRAIRIE			
7275 STATE HIGHWAY N		<b>Telephone</b> (636) 865-0200	Alzheimer's Unit	No
DARDENNE PRAIRIE	MO 63368-7128	Level of Care: SNF	Bed Capacity	38
Mailing Address 7275 STATE HIGHWA	AYN	County SAINT CHARLES	DMH Licensed	No
DARDENNE PRAIRIE	MO 63368-7128	Region 5 Medicare	Facility Number 3	2331
SUNTERRA SPRINGS INDEPENDEN	ICE			
19200 E 37TH TERRACE S	ICE	<b>Telephone</b> (816) 335-3008	Alzheimer's Unit	No
INDEPENDENCE	MO 64057-8324	Level of Care: SNF	Bed Capacity	38
Mailing Address 19200 E 37TH TERRA		County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64057-8324	Region 3 Medicare		0894
INDELENDENCE	WO 04037-0324	Region 3 Medicare	racinty Number 5	0894
SUNTERRA SPRINGS SPRINGFIELI	)			
4935 S NATIONAL AVE		<b>Telephone</b> (417) 720-8050	Alzheimer's Unit	No
SPRINGFIELD	MO 65810-2989	Level of Care: SNF	<b>Bed Capacity</b>	38
Mailing Address 4935 S NATIONAL A	VE	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65810-2989	Region 1 Medicare	Facility Number 3	1273
CUDEDIOD MANOD OF DOUNTOW	NILLC			
SUPERIOR MANOR OF DOWNTOW	N, LLC	Tolonkono (214) 276 5000	Algheimen's Unit	NO
1501 CLINTON STREET		<b>Telephone</b> (314) 376-5000	Alzheimer's Unit	NO 40
1501 CLINTON STREET SAINT LOUIS	MO 63106-4100	Level of Care: RCF	Bed Capacity	40
1501 CLINTON STREET SAINT LOUIS Mailing Address 1501 CLINTON STRE	MO 63106-4100 ET	Level of Care: RCF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed	40 No
1501 CLINTON STREET SAINT LOUIS	MO 63106-4100	Level of Care: RCF	Bed Capacity DMH Licensed	40
1501 CLINTON STREET SAINT LOUIS Mailing Address 1501 CLINTON STRE	MO 63106-4100 ET MO 63106-4100	Level of Care: RCF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed	40 No
1501 CLINTON STREET SAINT LOUIS Mailing Address 1501 CLINTON STRE SAINT LOUIS	MO 63106-4100 ET MO 63106-4100	Level of Care: RCF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed	40 No
1501 CLINTON STREET SAINT LOUIS Mailing Address 1501 CLINTON STRE SAINT LOUIS SURREY PLACE ST LUKE'S HOSPIT	MO 63106-4100 ET MO 63106-4100	Level of Care: RCF County SAINT LOUIS COUNTY Region 7	Bed Capacity DMH Licensed Facility Number 3	40 No 0136
1501 CLINTON STREET SAINT LOUIS Mailing Address 1501 CLINTON STRE SAINT LOUIS  SURREY PLACE ST LUKE'S HOSPIT 14701 OLIVE BLVD	MO 63106-4100 ET MO 63106-4100 FAL SKILLED NURSING	Level of Care: RCF County SAINT LOUIS COUNTY Region 7  Telephone (314) 542-3300	Bed Capacity DMH Licensed Facility Number 3  Alzheimer's Unit	40 No 0136 Yes
1501 CLINTON STREET SAINT LOUIS Mailing Address 1501 CLINTON STRE SAINT LOUIS  SURREY PLACE ST LUKE'S HOSPIT 14701 OLIVE BLVD CHESTERFIELD	MO 63106-4100 ET MO 63106-4100 FAL SKILLED NURSING	Level of Care: RCF County SAINT LOUIS COUNTY Region 7  Telephone (314) 542-3300 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number 3  Alzheimer's Unit Bed Capacity DMH Licensed	40 No 0136 Yes 130
1501 CLINTON STREET SAINT LOUIS Mailing Address 1501 CLINTON STRE SAINT LOUIS  SURREY PLACE ST LUKE'S HOSPIT 14701 OLIVE BLVD CHESTERFIELD Mailing Address 14701 OLIVE BLVD CHESTERFIELD	MO 63106-4100 ET MO 63106-4100 FAL SKILLED NURSING MO 63017-2221	Level of Care: RCF County SAINT LOUIS COUNTY Region 7  Telephone (314) 542-3300 Level of Care: SNF County SAINT LOUIS COUNTY	Bed Capacity DMH Licensed Facility Number 3  Alzheimer's Unit Bed Capacity DMH Licensed	40 No 0136 Yes 130 No
1501 CLINTON STREET SAINT LOUIS Mailing Address 1501 CLINTON STRE SAINT LOUIS  SURREY PLACE ST LUKE'S HOSPIT 14701 OLIVE BLVD CHESTERFIELD Mailing Address 14701 OLIVE BLVD CHESTERFIELD  SWEET SPRINGS VILLA	MO 63106-4100 ET MO 63106-4100 FAL SKILLED NURSING MO 63017-2221	Level of Care: RCF County SAINT LOUIS COUNTY Region 7  Telephone (314) 542-3300 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number 3  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number 1	40 No 0136 Yes 130 No 5467
1501 CLINTON STREET SAINT LOUIS Mailing Address 1501 CLINTON STRE SAINT LOUIS  SURREY PLACE ST LUKE'S HOSPIT 14701 OLIVE BLVD CHESTERFIELD Mailing Address 14701 OLIVE BLVD CHESTERFIELD  SWEET SPRINGS VILLA 518 E MARSHALL	MO 63106-4100 ET MO 63106-4100 FAL SKILLED NURSING MO 63017-2221 MO 63017-2221	Level of Care: RCF County SAINT LOUIS COUNTY Region 7  Telephone (314) 542-3300 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 335-6391	Bed Capacity DMH Licensed Facility Number 3  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number 1	40 No 0136 Yes 130 No 5467
1501 CLINTON STREET SAINT LOUIS Mailing Address 1501 CLINTON STRE SAINT LOUIS  SURREY PLACE ST LUKE'S HOSPIT 14701 OLIVE BLVD CHESTERFIELD Mailing Address 14701 OLIVE BLVD CHESTERFIELD  SWEET SPRINGS VILLA 518 E MARSHALL SWEET SPRINGS	MO 63106-4100 ET MO 63106-4100 FAL SKILLED NURSING MO 63017-2221	Level of Care: RCF County SAINT LOUIS COUNTY Region 7  Telephone (314) 542-3300 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 335-6391 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number 3  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number 1  Alzheimer's Unit Bed Capacity	40 No 0136 Yes 130 No 5467
1501 CLINTON STREET SAINT LOUIS Mailing Address 1501 CLINTON STRE SAINT LOUIS  SURREY PLACE ST LUKE'S HOSPIT 14701 OLIVE BLVD CHESTERFIELD Mailing Address 14701 OLIVE BLVD CHESTERFIELD  SWEET SPRINGS VILLA 518 E MARSHALL SWEET SPRINGS Mailing Address 518 E MARSHALL	MO 63106-4100 ET MO 63106-4100  FAL SKILLED NURSING MO 63017-2221  MO 63017-2221  MO 65351-9756	Level of Care: RCF County SAINT LOUIS COUNTY Region 7  Telephone (314) 542-3300 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 335-6391 Level of Care: SNF County SALINE	Bed Capacity DMH Licensed Facility Number 3  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number 1  Alzheimer's Unit Bed Capacity DMH Licensed	40 No 0136 Yes 130 No 5467
1501 CLINTON STREET SAINT LOUIS Mailing Address 1501 CLINTON STRE SAINT LOUIS  SURREY PLACE ST LUKE'S HOSPIT 14701 OLIVE BLVD CHESTERFIELD Mailing Address 14701 OLIVE BLVD CHESTERFIELD  SWEET SPRINGS VILLA 518 E MARSHALL SWEET SPRINGS	MO 63106-4100 ET MO 63106-4100 FAL SKILLED NURSING MO 63017-2221 MO 63017-2221	Level of Care: RCF County SAINT LOUIS COUNTY Region 7  Telephone (314) 542-3300 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 335-6391 Level of Care: SNF	Bed Capacity DMH Licensed Facility Number 3  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number 1  Alzheimer's Unit Bed Capacity DMH Licensed	40 No 0136 Yes 130 No 5467
1501 CLINTON STREET SAINT LOUIS Mailing Address 1501 CLINTON STRE SAINT LOUIS  SURREY PLACE ST LUKE'S HOSPIT 14701 OLIVE BLVD CHESTERFIELD Mailing Address 14701 OLIVE BLVD CHESTERFIELD  SWEET SPRINGS VILLA 518 E MARSHALL SWEET SPRINGS Mailing Address 518 E MARSHALL	MO 63106-4100 ET MO 63106-4100  FAL SKILLED NURSING MO 63017-2221  MO 63017-2221  MO 65351-9756  MO 65351-9756	Level of Care: RCF County SAINT LOUIS COUNTY Region 7  Telephone (314) 542-3300 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 335-6391 Level of Care: SNF County SALINE	Bed Capacity DMH Licensed Facility Number 3  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number 1  Alzheimer's Unit Bed Capacity DMH Licensed	40 No 0136 Yes 130 No 5467
1501 CLINTON STREET SAINT LOUIS  Mailing Address 1501 CLINTON STRE SAINT LOUIS  SURREY PLACE ST LUKE'S HOSPIT 14701 OLIVE BLVD CHESTERFIELD  Mailing Address 14701 OLIVE BLVD CHESTERFIELD  SWEET SPRINGS VILLA 518 E MARSHALL SWEET SPRINGS  Mailing Address 518 E MARSHALL SWEET SPRINGS	MO 63106-4100 ET MO 63106-4100  FAL SKILLED NURSING MO 63017-2221  MO 63017-2221  MO 65351-9756  MO 65351-9756	Level of Care: RCF County SAINT LOUIS COUNTY Region 7  Telephone (314) 542-3300 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 335-6391 Level of Care: SNF County SALINE Region 5 Medicare/Medicaid  Telephone (573) 778-1129	Bed Capacity DMH Licensed Facility Number 3  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number 1  Alzheimer's Unit Bed Capacity DMH Licensed	40 No 0136 Yes 130 No 5467
1501 CLINTON STREET SAINT LOUIS  Mailing Address 1501 CLINTON STREET SAINT LOUIS  SURREY PLACE ST LUKE'S HOSPIT 14701 OLIVE BLVD CHESTERFIELD  Mailing Address 14701 OLIVE BLVD CHESTERFIELD  SWEET SPRINGS VILLA 518 E MARSHALL SWEET SPRINGS  Mailing Address 518 E MARSHALL SWEET SPRINGS  SWIFT CREEK RESIDENTIAL CARI 1673 HIGHWAY 53 POPLAR BLUFF	MO 63106-4100 ET MO 63106-4100  FAL SKILLED NURSING MO 63017-2221  MO 63017-2221  MO 65351-9756  MO 65351-9756	Level of Care: RCF County SAINT LOUIS COUNTY Region 7  Telephone (314) 542-3300 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 335-6391 Level of Care: SNF County SALINE Region 5 Medicare/Medicaid  Telephone (573) 778-1129 Level of Care: RCF*	Bed Capacity DMH Licensed Facility Number 3  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number 1  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number 0	40 No 0136 Yes 130 No 5467 No 120 No 5378
1501 CLINTON STREET SAINT LOUIS  Mailing Address 1501 CLINTON STRE SAINT LOUIS  SURREY PLACE ST LUKE'S HOSPIT 14701 OLIVE BLVD CHESTERFIELD  Mailing Address 14701 OLIVE BLVD CHESTERFIELD  SWEET SPRINGS VILLA 518 E MARSHALL SWEET SPRINGS  Mailing Address 518 E MARSHALL SWEET SPRINGS  SWIFT CREEK RESIDENTIAL CARI 1673 HIGHWAY 53	MO 63106-4100 ET MO 63106-4100  FAL SKILLED NURSING MO 63017-2221  MO 63017-2221  MO 65351-9756  MO 65351-9756  E CENTER	Level of Care: RCF County SAINT LOUIS COUNTY Region 7  Telephone (314) 542-3300 Level of Care: SNF County SAINT LOUIS COUNTY Region 7 Medicare/Medicaid  Telephone (660) 335-6391 Level of Care: SNF County SALINE Region 5 Medicare/Medicaid  Telephone (573) 778-1129	Bed Capacity DMH Licensed Facility Number 3  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number 1  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number 0	40 No 0136 Yes 130 No 5467 No 120 No 5378

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SWITZER RESIDENTIAL CARE 3260 MYSTIC LANE		<b>Telephone</b> (573) 785-9399	Alzheimer's Unit	No
POPLAR BLUFF	MO 63901-3067	Level of Care: RCF*	Bed Capacity	20
Mailing Address 3260 MYSTIC LANE		County BUTLER	DMH Licensed	Yes
POPLAR BLUFF	MO 63901-3067		Facility Number	20739
POPLAR BLUFF	WO 03901-3007	Region 2	racinty Number	20739
SWOPE RIDGE GERIATRIC CENT	ER			
5900 SWOPE PARKWAY		<b>Telephone</b> (816) 333-2700	Alzheimer's Unit	No
KANSAS CITY	MO 64130-4241	Level of Care: SNF	Bed Capacity	120
Mailing Address 5900 SWOPE PRKW		County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64130-4241	Region 3 Medicare/Medicaid	Facility Number	07904
Mil (o) to CIT I	MO 01130 1211	region 5 Wedicare/Medicard	Tacinty Number	07704
SYLVAN HOUSE				
30 SHERMAN RD		<b>Telephone</b> (314) 892-2212	Alzheimer's Unit	No
SAINT LOUIS	MO 63125-4125	Level of Care: RCF	Bed Capacity	40
Mailing Address 30 SHERMAN RD		County SAINT LOUIS COUNTY	DMH Licensed	Yes
SAINT LOUIS	MO 63125-4125	Region 7	Facility Number	15078
SYLVIA G THOMPSON RESIDENC	E CENTER, INC			
3333 WEST TENTH ST		<b>Telephone</b> (660) 826-2118	Alzheimer's Unit	Yes
SEDALIA	MO 65301-2113	Level of Care: SNF	Bed Capacity	120
Mailing Address 3333 WEST TENTH		County PETTIS	DMH Licensed	No
SEDALIA	MO 65301-2113	Region 6 Medicaid	Facility Number	17278
TARKIO REHABILITATION & HE	ALTH CARE			
300 CEDAR ST				
300 CEDAR ST		<b>Telephone</b> (660) 736-4116	Alzheimer's Unit	No
	MO 64491-1174	Telephone (660) 736-4116 Level of Care: SNF	Alzheimer's Unit Bed Capacity	No 95
TARKIO	MO 64491-1174	Level of Care: SNF	Alzheimer's Unit Bed Capacity DMH Licensed	No 95 No
	MO 64491-1174 MO 64491-1174	Level of Care: SNF	<b>Bed Capacity</b>	95
TARKIO Mailing Address 300 CEDAR ST		Level of Care: SNF County ATCHISON	Bed Capacity DMH Licensed	95 No
TARKIO  Mailing Address 300 CEDAR ST  TARKIO  TEAL LAKE - ASSISTED LIVING B	MO 64491-1174	Level of Care: SNF County ATCHISON Region 4 Medicare/Medicaid	Bed Capacity DMH Licensed Facility Number	95 No 00494
TARKIO  Mailing Address 300 CEDAR ST  TARKIO  TEAL LAKE - ASSISTED LIVING B  1722 HUNTINGFIELD DR	MO 64491-1174 SY AMERICARE	Level of Care: SNF County ATCHISON Region 4 Medicare/Medicaid  Telephone (573) 582-7800	Bed Capacity DMH Licensed Facility Number Alzheimer's Unit	95 No 00494 No
TARKIO Mailing Address 300 CEDAR ST TARKIO  TEAL LAKE - ASSISTED LIVING B 1722 HUNTINGFIELD DR MEXICO	MO 64491-1174  EY AMERICARE  MO 65265-3808	Level of Care: SNF County ATCHISON Region 4 Medicare/Medicaid  Telephone (573) 582-7800 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	95 No 00494 No 42
TARKIO Mailing Address 300 CEDAR ST TARKIO  TEAL LAKE - ASSISTED LIVING B 1722 HUNTINGFIELD DR MEXICO Mailing Address 1722 HUNTINGFIEL	MO 64491-1174  EY AMERICARE  MO 65265-3808  D DR	Level of Care: SNF County ATCHISON Region 4 Medicare/Medicaid  Telephone (573) 582-7800 Level of Care: ALF** County AUDRAIN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	95 No 00494 No 42 No
TARKIO  Mailing Address 300 CEDAR ST  TARKIO  TEAL LAKE - ASSISTED LIVING B  1722 HUNTINGFIELD DR  MEXICO	MO 64491-1174  EY AMERICARE  MO 65265-3808	Level of Care: SNF County ATCHISON Region 4 Medicare/Medicaid  Telephone (573) 582-7800 Level of Care: ALF**	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	95 No 00494 No 42
TARKIO Mailing Address 300 CEDAR ST TARKIO  TEAL LAKE - ASSISTED LIVING B 1722 HUNTINGFIELD DR MEXICO Mailing Address 1722 HUNTINGFIEL	MO 64491-1174  EY AMERICARE  MO 65265-3808  D DR  MO 65265-3808	Level of Care: SNF County ATCHISON Region 4 Medicare/Medicaid  Telephone (573) 582-7800 Level of Care: ALF** County AUDRAIN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	95 No 00494 No 42 No
TARKIO  Mailing Address 300 CEDAR ST TARKIO  TEAL LAKE - ASSISTED LIVING B 1722 HUNTINGFIELD DR MEXICO  Mailing Address 1722 HUNTINGFIEL MEXICO	MO 64491-1174  EY AMERICARE  MO 65265-3808  D DR  MO 65265-3808	Level of Care: SNF County ATCHISON Region 4 Medicare/Medicaid  Telephone (573) 582-7800 Level of Care: ALF** County AUDRAIN Region 5	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	95 No 00494 No 42 No 23534
TARKIO  Mailing Address 300 CEDAR ST TARKIO  TEAL LAKE - ASSISTED LIVING B 1722 HUNTINGFIELD DR MEXICO Mailing Address 1722 HUNTINGFIEL MEXICO  TESSLAND RESIDENTIAL CARE B	MO 64491-1174  EY AMERICARE  MO 65265-3808  D DR  MO 65265-3808	Level of Care: SNF County ATCHISON Region 4 Medicare/Medicaid  Telephone (573) 582-7800 Level of Care: ALF** County AUDRAIN Region 5  Telephone (660) 265-4391	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	95 No 00494 No 42 No
TARKIO  Mailing Address 300 CEDAR ST TARKIO  TEAL LAKE - ASSISTED LIVING B 1722 HUNTINGFIELD DR MEXICO  Mailing Address 1722 HUNTINGFIEL MEXICO  TESSLAND RESIDENTIAL CARE B 24583 HIGHWAY 5 MILAN	MO 64491-1174  SY AMERICARE  MO 65265-3808  D DR  MO 65265-3808  CACILITY LLC	Level of Care: SNF County ATCHISON Region 4 Medicare/Medicaid  Telephone (573) 582-7800 Level of Care: ALF** County AUDRAIN Region 5  Telephone (660) 265-4391 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	95 No 00494 No 42 No 23534
TARKIO  Mailing Address 300 CEDAR ST TARKIO  TEAL LAKE - ASSISTED LIVING B 1722 HUNTINGFIELD DR MEXICO  Mailing Address 1722 HUNTINGFIEL MEXICO  TESSLAND RESIDENTIAL CARE B 24583 HIGHWAY 5 MILAN Mailing Address 24583 HWY 5	MO 64491-1174  EY AMERICARE  MO 65265-3808  D DR  MO 65265-3808  EACILITY LLC  MO 63556-2809	Level of Care: SNF County ATCHISON Region 4 Medicare/Medicaid  Telephone (573) 582-7800 Level of Care: ALF** County AUDRAIN Region 5  Telephone (660) 265-4391 Level of Care: RCF County SULLIVAN	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	95 No 00494 No 42 No 23534 No 9 Yes
TARKIO  Mailing Address 300 CEDAR ST TARKIO  TEAL LAKE - ASSISTED LIVING B 1722 HUNTINGFIELD DR MEXICO  Mailing Address 1722 HUNTINGFIEL MEXICO  TESSLAND RESIDENTIAL CARE B 24583 HIGHWAY 5 MILAN	MO 64491-1174  SY AMERICARE  MO 65265-3808  D DR  MO 65265-3808  CACILITY LLC	Level of Care: SNF County ATCHISON Region 4 Medicare/Medicaid  Telephone (573) 582-7800 Level of Care: ALF** County AUDRAIN Region 5  Telephone (660) 265-4391 Level of Care: RCF	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity	95 No 00494 No 42 No 23534
TARKIO  Mailing Address 300 CEDAR ST TARKIO  TEAL LAKE - ASSISTED LIVING B 1722 HUNTINGFIELD DR MEXICO  Mailing Address 1722 HUNTINGFIEL MEXICO  TESSLAND RESIDENTIAL CARE B 24583 HIGHWAY 5 MILAN  Mailing Address 24583 HWY 5 MILAN  THE OAKS RETIREMENT COMMIN	MO 64491-1174  EY AMERICARE  MO 65265-3808  D DR  MO 65265-3808  EACILITY LLC  MO 63556-2809  MO 63556-2809	Level of Care: SNF County ATCHISON Region 4 Medicare/Medicaid  Telephone (573) 582-7800 Level of Care: ALF** County AUDRAIN Region 5  Telephone (660) 265-4391 Level of Care: RCF County SULLIVAN Region 5	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	95 No 00494 No 42 No 23534 No 9 Yes
TARKIO  Mailing Address 300 CEDAR ST TARKIO  TEAL LAKE - ASSISTED LIVING B 1722 HUNTINGFIELD DR MEXICO  Mailing Address 1722 HUNTINGFIEL MEXICO  TESSLAND RESIDENTIAL CARE B 24583 HIGHWAY 5 MILAN  Mailing Address 24583 HWY 5 MILAN  THE OAKS RETIREMENT COMMIT 127 HAMLET ROAD	MO 64491-1174  EY AMERICARE  MO 65265-3808  D DR  MO 65265-3808  EACILITY LLC  MO 63556-2809  MO 63556-2809	Level of Care: SNF County ATCHISON Region 4 Medicare/Medicaid  Telephone (573) 582-7800 Level of Care: ALF** County AUDRAIN Region 5  Telephone (660) 265-4391 Level of Care: RCF County SULLIVAN Region 5	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed	95 No 00494 No 42 No 23534 No 9 Yes
TARKIO  Mailing Address 300 CEDAR ST TARKIO  TEAL LAKE - ASSISTED LIVING B 1722 HUNTINGFIELD DR MEXICO  Mailing Address 1722 HUNTINGFIEL MEXICO  TESSLAND RESIDENTIAL CARE B 24583 HIGHWAY 5 MILAN  Mailing Address 24583 HWY 5 MILAN  THE OAKS RETIREMENT COMMIT 127 HAMLET ROAD BRANSON	MO 64491-1174  EY AMERICARE  MO 65265-3808  D DR  MO 65265-3808  FACILITY LLC  MO 63556-2809  MO 63556-2809  UNITY  MO 65616-7746	Level of Care: SNF County ATCHISON Region 4 Medicare/Medicaid  Telephone (573) 582-7800 Level of Care: ALF** County AUDRAIN Region 5  Telephone (660) 265-4391 Level of Care: RCF County SULLIVAN Region 5	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	95 No 00494 No 42 No 23534 No 9 Yes 19990
TARKIO  Mailing Address 300 CEDAR ST TARKIO  TEAL LAKE - ASSISTED LIVING B 1722 HUNTINGFIELD DR MEXICO  Mailing Address 1722 HUNTINGFIEL MEXICO  TESSLAND RESIDENTIAL CARE B 24583 HIGHWAY 5 MILAN  Mailing Address 24583 HWY 5 MILAN  THE OAKS RETIREMENT COMMIT 127 HAMLET ROAD	MO 64491-1174  EY AMERICARE  MO 65265-3808  D DR  MO 65265-3808  FACILITY LLC  MO 63556-2809  MO 63556-2809  UNITY  MO 65616-7746	Level of Care: SNF County ATCHISON Region 4 Medicare/Medicaid  Telephone (573) 582-7800 Level of Care: ALF** County AUDRAIN Region 5  Telephone (660) 265-4391 Level of Care: RCF County SULLIVAN Region 5	Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number  Alzheimer's Unit Bed Capacity DMH Licensed Facility Number	95 No 00494 No 42 No 23534 No 9 Yes 19990

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THOMAS RESIDENTIAL CARE FACILITY III	
1415 OLIVE ST	Telephone (816) 676-0390 Alzheimer's Unit No
SAINT JOSEPH MO 64503-2	Level of Care: RCF Bed Capacity 20
Mailing Address 1415 OLIVE ST	County BUCHANAN DMH Licensed Yes
SAINT JOSEPH MO 64503-2	Region 4 Facility Number 06076
TIFFANY HEIGHTS	
115FANY HEIGHTS 1531 NEBRASKA ST	Telephone (660) 442-3146 Alzheimer's Unit No
MOUND CITY MO 64470-1	(***)
Mailing Address PO BOX 308	
e	
MOUND CITY MO 64470-0	Region 4 Medicare/Medicaid Facility Number 07998
TIFFANY SPRINGS REHABILITATION & HEAL	
9191 N AMBASSADOR DR	Telephone (816) 741-5570 Alzheimer's Unit No
KANSAS CITY MO 64154-7	• •
Mailing Address 9191 N AMBASSADOR DR	County PLATTE DMH Licensed No
KANSAS CITY MO 64154-7	Region 4 Medicare/Medicaid Facility Number 30748
TIFFANY SPRINGS SENIOR CARE COMMUNITY	
9101 N AMBASSADOR DRIVE	Telephone (816) 621-3810 Alzheimer's Unit Yes
KANSAS CITY MO 64154-7	Level of Care: ALF** Bed Capacity 89
Mailing Address 9101 N AMBASSADOR DRIVE	County PLATTE DMH Licensed No
KANSAS CITY MO 64154-7	Region 4 Facility Number 31745
TIGER PLACE	
2910 BLUFF CREEK DR	Telephone (573) 256-4620 Alzheimer's Unit No
COLUMBIA MO 65201-3	• •
Mailing Address 2910 BLUFF CREEK DR	County BOONE DMH Licensed No
COLUMBIA MO 65201-3	Facility Number 24341
TIMBERLAKE CARE CENTER	
12110 HOLMES RD	Telephone (816) 941-3006 Alzheimer's Unit No
KANSAS CITY MO 64145-	
Mailing Address 12110 HOLMES RD	County JACKSON DMH Licensed No
KANSAS CITY MO 64145-	707 Region 3 Medicare/Medicaid Facility Number 10962
TIMBERG THE	
TIMBERS, THE	(500) 45 0000
239 KAREN DRIVE	Telephone (573) 415-0390 Alzheimer's Unit No
HOLTS SUMMIT MO 65043-2	
Mailing Address 239 KAREN DRIVE	County CALLAWAY DMH Licensed No
HOLTS SUMMIT MO 65043-2	Facility Number 30384
TIPTON OAY MANOR	
TIPTON OAK MANOR	Talanhana (660) 422 5574 Alahaimania Iluit V
601 WEST MORGAN ST	Telephone (660) 433-5574 Alzheimer's Unit Yes
TIPTON MO 65081-8	• •
Mailing Address 601 WEST MORGAN ST	County MONITEAU DMH Licensed No
TIPTON MO 65081-8	Region 6 Medicare/Medicaid Facility Number 08036

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TOWN AND COUNTRY HEALTH &	REHAB			
13995 CLAYTON RD		<b>Telephone</b> (636) 227-5070	Alzheimer's Unit	Yes
TOWN AND COUNTRY	MO 63017-8400	Level of Care: SNF	Bed Capacity	282
Mailing Address 13995 CLAYTON RD	)	County SAINT LOUIS COUNTY	DMH Licensed	No
TOWN AND COUNTRY	MO 63017-8400	Region 7 Medicare/Medicaid	Facility Number	01508
			•	
TOWNE HOUSE THE				
TOWNE HOUSE, THE 221 EAST WHITLEY		<b>Telephone</b> (573) 581-2547	A 1-1: T 1:4	No
MEXICO	MO 65265 2915	. ,	Alzheimer's Unit	No 29
	MO 65265-2815		Bed Capacity	
Mailing Address PO BOX 6	MO (52(5,000)	County AUDRAIN	DMH Licensed	Yes
MEXICO	MO 65265-0006	Region 5	Facility Number	08077
TOWASSIED CENTOD I INTO THE				
TOWNSHIP SENIOR LIVING, THE 4150 WEST REPUBLIC ROAD		Tolonbono (417) 991 7900	Alzheimer's Unit	Yes
BATTLEFIELD	MO 65610 7111	Telephone (417) 881-7800 Level of Care: ALF**		66
	MO 65619-7111		Bed Capacity	
Mailing Address 4150 WEST REPUBL		County GREENE	DMH Licensed	No
BATTLEFIELD	MO 65619-7111	Region 1	Facility Number	31903
TRI-COUNTY CARE CENTER				
601 NORTH GALLOWAY RD		<b>Telephone</b> (573) 594-6467	Alzheimer's Unit	Yes
VANDALIA	MO 63382-1252	Level of Care: SNF	Bed Capacity	90
Mailing Address 601 NORTH GALLOV		County AUDRAIN	DMH Licensed	No
VANDALIA	MO 63382-1252			
VANDALIA	MO 03382-1232	Region 5 Medicare/Medicaid	Facility Number	08096
TRI-COUNTY CARE CENTER				
601 NORTH GALLOWAY RD		<b>Telephone</b> (573) 594-6467	Alzheimer's Unit	No
VANDALIA	MO 63382-1252	Level of Care: RCF*	Bed Capacity	20
Mailing Address 601 NORTH GALLOV		County AUDRAIN	DMH Licensed	No
VANDALIA	MO 63382-1252	Region 5	Facility Number	08096
,	110 00002 1202	Region 5	Tuestey Transpor	00070
TROY HOUSE RESCARE				
350 CAP AU GRIS		<b>Telephone</b> (636) 462-4915	Alzheimer's Unit	No
TROY	MO 63379-1761	Level of Care: RCF*	Bed Capacity	23
Mailing Address PO BOX 271		County LINCOLN	DMH Licensed	No
TROY	MO 63379-0271	Region 5	Facility Number	08129
TROY MANOR				
200 THOMPSON DR		<b>Telephone</b> (636) 528-8446	Alzheimer's Unit	No
TROY	MO 63379-2308	Level of Care: ALF	Bed Capacity	20
Mailing Address 200 THOMPSON DR		County LINCOLN	DMH Licensed	No
TROY	MO 63379-2308	Region 5	Facility Number	05397
TROY MANOR				
200 THOMPSON DR		<b>Telephone</b> (636) 528-8446	Alzheimer's Unit	Yes
TROY	MO 63379-2308	Level of Care: SNF	Bed Capacity	130
Mailing Address 200 THOMPSON DR		County LINCOLN	DMH Licensed	No
The state of the s		County EntCOLIT	Divili Diceiscu	110

Medicare/Medicaid

**Facility Number** 

05397

MO 63379-2308

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TRUMAN HEALTHCARE & REHAI	BILITATION CENTER		
206 WEST FIRST ST		<b>Telephone</b> (417) 682-5718	Alzheimer's Unit Yes
LAMAR	MO 64759-1291	Level of Care: SNF	<b>Bed Capacity</b> 123
Mailing Address 206 WEST FIRST ST		County BARTON	DMH Licensed No
LAMAR	MO 64759-1291	Region 1 Medicare/Medicaid	Facility Number 01346
TOURAND ARE MANOR INC			
TRUMAN LAKE MANOR, INC		T. 1. 1. (417) (44 2249	Allerton to TI-4
600 EAST 7TH ST	MO (4762-0671	<b>Telephone</b> (417) 644-2248	Alzheimer's Unit No
LOWRY CITY Mailing Address PO BOX 415	MO 64763-9671	Level of Care: SNF County SAINT CLAIR	Bed Capacity 120  DMH Licensed No
8	MO 64762 0415		
LOWRY CITY	MO 64763-0415	Region 1 Medicare/Medicaid	Facility Number 08140
TURNERS ROCK			
3911 EAST HIGHWAY D		<b>Telephone</b> (417) 459-4070	Alzheimer's Unit YES
SPRINGFIELD	MO 65809-	Level of Care: ALF**	Bed Capacity 70
Mailing Address 3911 EAST HIGHWA	AY D	County GREENE	<b>DMH Licensed</b> No
SPRINGFEILD	MO 65809-	Region 1	Facility Number 32441
TURNING POINT GROUP HOME			
1720 SWOPE DR		<b>Telephone</b> (816) 257-1435	Alzheimer's Unit No
INDEPENDENCE	MO 64057-2163	Level of Care: RCF	Bed Capacity 12
Mailing Address PO BOX 260		County JACKSON	DMH Licensed Yes
INDEPENDENCE	MO 64051-0693	Region 3	Facility Number 13608
TWIN OAKS AT HEDITAGE DOING	NT.		
TWIN OAKS AT HERITAGE POINT	.E	Talanhana (626) 542 5400	Alabaiman'a Unit Vas
228 SAVANNAH TERRACE WENTZVILLE	MO (2205 2741	Telephone (636) 542-5400 Level of Care: ALF**	Alzheimer's Unit Yes Bed Capacity 70
	MO 63385-3741		
Mailing Address 228 SAVANNAH TE WENTZVILLE	MO 63385-3741	•	
WENTZVILLE	WO 03383-3741	Region 5	Facility Number 26877
TWIN OAKS ESTATE, INC			
707 EMGE RD		<b>Telephone</b> (636) 240-6152	Alzheimer's Unit No
O'FALLON	MO 63366-2118	Level of Care: RCF*	<b>Bed Capacity</b> 149
Mailing Address 707 EMGE RD		County SAINT CHARLES	<b>DMH Licensed</b> No
O'FALLON	MO 63366-2118	Region 5	Facility Number 08209
TWIN PINES ADULT CARE CENTE	CR CR		
1900 S JAMISON		<b>Telephone</b> (660) 665-2887	Alzheimer's Unit NO
KIRKSVILLE	MO 63501-5302	Level of Care: SNF	Bed Capacity 120
Mailing Address 1900 S JAMISON		County ADAIR	DMH Licensed No
KIRKSVILLE	MO 63501-5302	Region 5 Medicare/Medicaid	Facility Number 08218
TWINS PLACE RESIDENTIAL CAR	E FACILITY		
506 S MAIN STREET		<b>Telephone</b> (573) 233-8009	Alzheimer's Unit No
CHARLESTON	MO 63834-1914	Level of Care: RCF	Bed Capacity 8
Mailing Address 506 S MAIN STREET		County MISSISSIPPI	DMH Licensed No
CHARLESTON	MO 63834-1914	Region 2	Facility Number 32227
		12081011 -	32221

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U-CITY FOREST MANOR		
1301 PARTRIDGE AVE	Telephone (314) 862-5556 Alzheimer's Unit	No
SAINT LOUIS MO 63130-194	• •	120
Mailing Address 1301 PARTRIDGE AVE	County SAINT LOUIS COUNTY DMH Licensed	No
SAINT LOUIS MO 63130-194	Region 7 Medicare/Medicaid Facility Number	15454
UNION CARE CENTER		
1080 MARIE LANE	Telephone (636) 206-8585 Alzheimer's Unit	No
UNION MO 63084-105		60
Mailing Address 1080 MARIE LANE	County FRANKLIN DMH Licensed	No
UNION MO 63084-105		31476
UNION MANOR, LLC		
2711 NORTH UNION BLVD	Telephone (314) 383-7310 Alzheimer's Unit	No
SAINT LOUIS MO 63113-100	• • • • • • • • • • • • • • • • • • • •	50
Mailing Address 2711 NORTH UNION BLVD	County SAINT LOUIS CITY DMH Licensed	Yes
SAINT LOUIS MO 63113-100	•	11002
URBANA REST HOME		
310 WALNUT ST	Telephone (417) 993-4638 Alzheimer's Unit	No
URBANA MO 65767-920	•	20
Mailing Address 310 WALNUT ST	County DALLAS DMH Licensed	Yes
URBANA MO 65767-920	Region 1 Facility Number	08242
	·	
VALLEY MANOR AND REHABILITATION CENTE	R	
VALLEY MANOR AND REHABILITATION CENTE 1410 HOSPITAL DR	CR Telephone (816) 637-1010 Alzheimer's Unit	No
	Telephone (816) 637-1010 Alzheimer's Unit	No 120
1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116	Telephone (816) 637-1010 Alzheimer's Unit	
1410 HOSPITAL DR	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed	120
1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  Mailing Address 1410 HOSPITAL DR	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed	120 No
1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  VALLEY PARK NORTH	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed Region 4 Medicare/Medicaid Facility Number	120 No 02425
1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  VALLEY PARK NORTH 2631 FAIRWAY DR	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed Region 4 Medicare/Medicaid Facility Number  Telephone (573) 592-4995 Alzheimer's Unit	120 No 02425 No
1410 HOSPITAL DR EXCELSIOR SPRINGS Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  VALLEY PARK NORTH 2631 FAIRWAY DR FULTON MO 65251-393	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed Region 4 Medicare/Medicaid Facility Number  Telephone (573) 592-4995 Alzheimer's Unit Level of Care: RCF Bed Capacity	120 No 02425 No 19
1410 HOSPITAL DR EXCELSIOR SPRINGS Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  VALLEY PARK NORTH 2631 FAIRWAY DR FULTON MO 65251-393 Mailing Address 2631 FAIRWAY DR	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed Region 4 Medicare/Medicaid Facility Number  Telephone (573) 592-4995 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed	120 No 02425 No 19 No
1410 HOSPITAL DR EXCELSIOR SPRINGS Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  VALLEY PARK NORTH 2631 FAIRWAY DR FULTON MO 65251-393	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed Region 4 Medicare/Medicaid Facility Number  Telephone (573) 592-4995 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed	120 No 02425 No 19
1410 HOSPITAL DR EXCELSIOR SPRINGS Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  VALLEY PARK NORTH 2631 FAIRWAY DR FULTON MO 65251-393 Mailing Address 2631 FAIRWAY DR	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed Region 4 Medicare/Medicaid Facility Number  Telephone (573) 592-4995 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed	120 No 02425 No 19 No
1410 HOSPITAL DR EXCELSIOR SPRINGS  Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS  MO 64024-116  VALLEY PARK NORTH 2631 FAIRWAY DR FULTON  MO 65251-393  Mailing Address 2631 FAIRWAY DR FULTON  MO 65251-393	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed Region 4 Medicare/Medicaid Facility Number  Telephone (573) 592-4995 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed Region 6 Facility Number	120 No 02425 No 19 No
1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  VALLEY PARK NORTH 2631 FAIRWAY DR FULTON MO 65251-393  Mailing Address 2631 FAIRWAY DR FULTON MO 65251-393  VALLEY PARK RETIREMENT CENTER	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed Region 4 Medicare/Medicaid Facility Number  Telephone (573) 592-4995 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed Region 6 Facility Number  Telephone (573) 896-0208 Alzheimer's Unit	120 No 02425 No 19 No 29982
1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  VALLEY PARK NORTH 2631 FAIRWAY DR FULTON MO 65251-393  Mailing Address 2631 FAIRWAY DR FULTON MO 65251-393  VALLEY PARK RETIREMENT CENTER 355 KAREN DR	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed Region 4 Medicare/Medicaid Facility Number  Telephone (573) 592-4995 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed Region 6 Facility Number  Telephone (573) 896-0208 Alzheimer's Unit	120 No 02425 No 19 No 29982
1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  VALLEY PARK NORTH 2631 FAIRWAY DR FULTON MO 65251-393  Mailing Address 2631 FAIRWAY DR FULTON MO 65251-393  VALLEY PARK RETIREMENT CENTER 355 KAREN DR HOLTS SUMMIT MO 65043-251	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed Region 4 Medicare/Medicaid Facility Number  Telephone (573) 592-4995 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed Region 6 Facility Number  Telephone (573) 896-0208 Alzheimer's Unit Level of Care: RCF Bed Capacity OMH Licensed  Telephone (573) 896-0208 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed	120 No 02425 No 19 No 29982
1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  VALLEY PARK NORTH  2631 FAIRWAY DR FULTON MO 65251-393  Mailing Address 2631 FAIRWAY DR FULTON MO 65251-393  VALLEY PARK RETIREMENT CENTER  355 KAREN DR HOLTS SUMMIT MO 65043-251  Mailing Address 355 KAREN DR	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed Region 4 Medicare/Medicaid Facility Number  Telephone (573) 592-4995 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed Region 6 Facility Number  Telephone (573) 896-0208 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed	120 No 02425 No 19 No 29982 No
1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  VALLEY PARK NORTH  2631 FAIRWAY DR FULTON MO 65251-393  Mailing Address 2631 FAIRWAY DR FULTON MO 65251-393  VALLEY PARK RETIREMENT CENTER  355 KAREN DR HOLTS SUMMIT MO 65043-251  Mailing Address 355 KAREN DR HOLTS SUMMIT MO 65043-251  VALLEY PARK WEST	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed Region 4 Medicare/Medicaid Facility Number  Telephone (573) 592-4995 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed Region 6 Facility Number  Telephone (573) 896-0208 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed Facility Number	120 No 02425 No 19 No 29982 No 27986
1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  VALLEY PARK NORTH  2631 FAIRWAY DR FULTON MO 65251-393  Mailing Address 2631 FAIRWAY DR FULTON MO 65251-393  VALLEY PARK RETIREMENT CENTER  355 KAREN DR HOLTS SUMMIT MO 65043-251  Mailing Address 355 KAREN DR HOLTS SUMMIT MO 65043-251  VALLEY PARK WEST 678 WINDMILL RIDGE	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed Region 4 Medicare/Medicaid Facility Number  Telephone (573) 592-4995 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed Region 6 Facility Number  Telephone (573) 896-0208 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed Facility Number  Telephone (573) 896-0208 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed Facility Number	120 No 02425 No 19 No 29982 No 27986
1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  VALLEY PARK NORTH 2631 FAIRWAY DR FULTON MO 65251-393  Mailing Address 2631 FAIRWAY DR FULTON MO 65251-393  VALLEY PARK RETIREMENT CENTER 355 KAREN DR HOLTS SUMMIT MO 65043-251  Mailing Address 355 KAREN DR HOLTS SUMMIT MO 65043-251  VALLEY PARK WEST 678 WINDMILL RIDGE CALIFORNIA MO 65018-196	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed Region 4 Medicare/Medicaid Facility Number  Telephone (573) 592-4995 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed Region 6 Facility Number  Telephone (573) 896-0208 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed Facility Number  Telephone (573) 896-0208 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed Facility Number  Telephone (573) 796-2520 Alzheimer's Unit Level of Care: RCF Bed Capacity	120 No 02425 No 19 No 29982 No 27986
1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  Mailing Address 1410 HOSPITAL DR EXCELSIOR SPRINGS MO 64024-116  VALLEY PARK NORTH  2631 FAIRWAY DR FULTON MO 65251-393  Mailing Address 2631 FAIRWAY DR FULTON MO 65251-393  VALLEY PARK RETIREMENT CENTER  355 KAREN DR HOLTS SUMMIT MO 65043-251  Mailing Address 355 KAREN DR HOLTS SUMMIT MO 65043-251  VALLEY PARK WEST 678 WINDMILL RIDGE	Telephone (816) 637-1010 Alzheimer's Unit Level of Care: SNF Bed Capacity County CLAY DMH Licensed Region 4 Medicare/Medicaid Facility Number  Telephone (573) 592-4995 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed Region 6 Facility Number  Telephone (573) 896-0208 Alzheimer's Unit Level of Care: RCF Bed Capacity County CALLAWAY DMH Licensed Region 6 Facility Number  Telephone (573) 896-0208 Alzheimer's Unit Region 6 Facility Number  Telephone (573) 796-2520 Alzheimer's Unit Level of Care: RCF Bed Capacity County MONITEAU DMH Licensed	120 No 02425 No 19 No 29982 No 27986

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VALLEY RESIDENTIAL CARE					
101 SOUTH KNOB ST		Telephone	(573) 546-3080	Alzheimer's Unit	No
IRONTON M	4O 63650-1501	Level of Care:	RCF	Bed Capacity	12
Mailing Address 203 SOUTH WASHINGT		County IRO	N	DMH Licensed	Yes
FARMINGTON M	AO 63640-1836	Region 2		Facility Number	01901
VALLEY VIEW HEALTH & REHABIL	ITATION				
1600 EAST ROLLINS ST		Telephone	(660) 263-6887	Alzheimer's Unit	No
MOBERLY M	4O 65270-2478	Level of Care:	SNF	Bed Capacity	96
Mailing Address 1600 E ROLLINS ST		County RAN	NDOLPH	DMH Licensed	No
MOBERLY M	4O 65270-2478	Region 5 N	Iedicare/Medicaid	Facility Number	13167
VERONICA HOUSE		T-11	(214) 200 0014	Allerton I TT 11	3.7
12284 DEPAUL DR		Telephone	(314) 209-8814	Alzheimer's Unit	No
	AO 63044-2508	Level of Care:	ALF**	Bed Capacity	100
Mailing Address 12284 DEPAUL DR		·	NT LOUIS COUNTY	DMH Licensed	No
BRIDGETON M	4O 63044-2508	Region 7		Facility Number	22460
VICTORIAN PLACE OF VIENNA, RES	SIDENTIAL CADE RV AMEDICADE	7			
112 PARKWAY DR	SIDENTIAL CARE DI AMERICARE	Telephone	(573) 422-3230	Alzheimer's Unit	No
	4O 65582-8003	Level of Care:	RCF	Bed Capacity	48
Mailing Address 112 PARKWAY DR	10 03302 0003	County MAI		DMH Licensed	No
o .	4O 65582-8003	Region 6	KILD	Facility Number	23333
VIEWAL	10 03302 0003	Kegion 0		racinty runner	23333
VICTORIAN PLACE OF CUBA, RESID	ENTIAL CARE BY AMERICARE				
901 HIGHWAY DD		Telephone	(573) 885-0551	Alzheimer's Unit	No
CUBA M	4O 65453-8089	Level of Care:	RCF	Bed Capacity	48
Mailing Address 901 HWY DD		County CRA	WFORD	DMH Licensed	No
CUBA M	4O 65453-8089	Region 6		Facility Number	25463
VICTORIAN PLACE OF HERMANN, R	RESIDENTIAL CARE BY AMERICA	RE			
2120 VILLAGE LN		Telephone	(573) 486-5060	Alzheimer's Unit	No
HERMANN M	4O 65041-1600	Level of Care:	RCF	Bed Capacity	48
Mailing Address 2120 VILLAGE LANE		County GAS	SCONADE	DMH Licensed	No
HERMANN M	4O 65041-1600	Region 6		Facility Number	24982
VICTORIAN PLACE OF OWENSVILLI	E DECIDENTIAL CADE DV AMEDI	CADE			
301 NORTH 7TH ST	E, RESIDENTIAL CARE DI AMERI	Telephone	(573) 437-5396	Alzheimer's Unit	No
	4O 65066-1075	Level of Care:	RCF	Bed Capacity	48
Mailing Address 301 NORTH 7TH ST	10 00000-1070		SCONADE	DMH Licensed	46 No
o .	MO 65066-1075	Region 6	CONADE	Facility Number	24133
O WEING A HETE IA	10 05000-1075	region 0		Facinty Number	24133
VICTORIAN PLACE OF ST CLAIR, AS	SSISTED LIVING BY AMERICARE				
160 CHARLES DR		Telephone	(636) 322-0003	Alzheimer's Unit	No
SAINT CLAIR M	4O 63077-1936	Level of Care:	ALF**	Bed Capacity	48
Mailing Address 160 CHARLES DR		County FRA	NKLIN	DMH Licensed	No
	4O 63077-1936	Region 6		Facility Number	26005

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VICTORIAN PLACE OF SULLIVA	AN, ASSISTED LIVING BY AMERICA	RE		
1250 EAST SPRINGFIELD RD	,	<b>Telephone</b> (573) 468-5217	Alzheimer's Unit	No
SULLIVAN	MO 63080-1358	Level of Care: ALF**	Bed Capacity	48
Mailing Address 1250 EAST SPRING	GFIELD RD	County FRANKLIN	DMH Licensed	No
SULLIVAN	MO 63080-1358	Region 6	Facility Number	26324
			·	
VICTORIAN PLACE OF UNION,	ASSISTED LIVING BY AMERICARE			
1320 W MAIN		<b>Telephone</b> (636) 584-0085	Alzheimer's Unit	No
UNION	MO 63084-1084	Level of Care: ALF**	<b>Bed Capacity</b>	48
Mailing Address 1320 W MAIN		County FRANKLIN	DMH Licensed	No
UNION	MO 63084-1084	Region 6	Facility Number	24408
VICTORIAN PLACE OF WASHIN	IGTON, RESIDENTIAL CARE BY AMI	ERICARE		
2800 RABBIT TRAIL DR		<b>Telephone</b> (636) 390-9500	Alzheimer's Unit	No
WASHINGTON	MO 63090-6737	Level of Care: ALF**	Bed Capacity	48
Mailing Address 2800 RABBIT TRA		County FRANKLIN	DMH Licensed	No
WASHINGTON	MO 63090-6737	Region 6	Facility Number	27659
VILLA AT BLUE RIDGE, THE				
701 BLUE RIDGE ROAD		<b>Telephone</b> (573) 474-6111	Alzheimer's Unit	No
COLUMBIA	MO 65201-3734	Level of Care: SNF	Bed Capacity	97
Mailing Address 701 BLUE RIDGE		County BOONE	DMH Licensed	No
COLUMBIA	MO 65201-3734	Region 6 Medicare/Medicaid	Facility Number	01706
VILLA VENTURA ASSISTED LIV	ING FACILITY			
12100 WORNALL RD		<b>Telephone</b> (816) 203-0345	Alzheimer's Unit	No
KANSAS CITY	MO 64145-1764	Level of Care: ALF**	<b>Bed Capacity</b>	50
Mailing Address 12100 WORNALL	RD	County JACKSON	DMH Licensed	No
KANSAS CITY	MO 64145-1764	<b>Region</b> 3	Facility Number	15614
VILLAGE ASSISTED LIVING				
1704 NORTHWEST O'BRIEN RD		<b>Telephone</b> (816) 347-2700	Alzheimer's Unit	Yes
LEE'S SUMMIT	MO 64081-1559	Level of Care: ALF**	Bed Capacity	172
Mailing Address 1704 NORTHWES		County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64081-1559	Region 3	Facility Number	16108
LLLS SOMMI	110 04001 1337	Acgion 5	Taciney Number	10100
VILLAGE ASSISTED LIVING				
1701 NW O'BRIEN RD		<b>Telephone</b> (816) 347-2700	Alzheimer's Unit	Yes
LEE'S SUMMIT	MO 64081-1559	Level of Care: ALF**	Bed Capacity	50
Mailing Address 1701 NW O'BRIEN	I RD	County JACKSON	DMH Licensed	No
LEE'S SUMMIT	MO 64081-1559	Region 3	Facility Number	29258
VILLAGE AT CARROLL PARK, T	гне			
5301 HARRY TRUMAN DR		<b>Telephone</b> (816) 761-6838	Alzheimer's Unit	No
GRANDVIEW	MO 64030-1708	Level of Care: ICF	<b>Bed Capacity</b>	93
Mailing Address 5301 HARRY TRU	JMAN DR	County JACKSON	DMH Licensed	Yes
GRANDVIEW	MO 64030-1708	Region 3	<b>Facility Number</b>	03157

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VILLAGE CARE CENTER, INC				
810 EAST EDWARDS ST		<b>Telephone</b> (660) 562-3515	Alzheimer's Unit	No
MARYVILLE	MO 64468-2917	Level of Care: RCF*	Bed Capacity	18
Mailing Address 810 EAST EDWARDS	SST	County NODAWAY	DMH Licensed	No
MARYVILLE	MO 64468-2917	Region 4	Facility Number	20361
		-		
VIII I ACE CADE CENTED INC				
VILLAGE CARE CENTER, INC 810 EAST EDWARDS ST		T-1 (660) 562 2515	A 1-1	No
MARYVILLE	MO 64468-2917	Telephone (660) 562-3515 Level of Care: SNF	Alzheimer's Unit	46
Mailing Address 810 EAST EDWARDS		County NODAWAY	Bed Capacity DMH Licensed	No
MARYVILLE	MO 64468-2917		Facility Number	20361
WARTVILLE	WO 04408-2917	Region 4 Medicare/Medicaid	racinty Number	20301
VILLAGE CENTER CARE OF WEN'	TZVILLE			
909 E PITMAN AVE		<b>Telephone</b> (636) 219-3114	Alzheimer's Unit	No
WENTZVILLE	MO 63385-1818	Level of Care: ALF**	Bed Capacity	22
Mailing Address 909 E PITMAN AVE		County SAINT CHARLES	DMH Licensed	No
WENTZVILLE	MO 63385-1818	Region 5	Facility Number	28026
VILLAGE WEST, THE				
318 EAST LITTLE BRICK ROAD		<b>Telephone</b> (816) 632-1121	Alzheimer's Unit	No
CAMERON	MO 64429-1231	Level of Care: RCF*	Bed Capacity	27
Mailing Address 318 EAST LITTLE BE		County DEKALB	DMH Licensed	No
CAMERON	MO 64429-1231	Region 4	Facility Number	18104
VILLAGE, THE				
320 EAST LITTLE BRICK RD		<b>Telephone</b> (816) 632-7611	Alzheimer's Unit	No
CAMERON	MO 64429-1231	Level of Care: RCF*	Bed Capacity	49
Mailing Address 320 EAST LITTLE BE		County DEKALB	DMH Licensed	No
CAMERON	MO 64429-1231	Region 4	Facility Number	08945
VILLAGES OF JACKSON CREEK M				
19400 EAST 40TH ST COURT SOUTH		<b>Telephone</b> (816) 478-5689	Alzheimer's Unit	Yes
INDEPENDENCE	MO 64057-1548	Level of Care: ICF	Bed Capacity	70
Mailing Address 19400 EAST 40TH ST		County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64057-1548	Region 3	Facility Number	25894
VILLAGES OF JACKSON CREEK, T	гне			
3980 SOUTH JACKSON DR		<b>Telephone</b> (816) 795-1433	Alzheimer's Unit	No
INDEPENDENCE	MO 64057-2205	Level of Care: SNF	Bed Capacity	120
Mailing Address 3980 S JACKSON DR		County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64057-2205	Region 3 Medicare/Medicaid	Facility Number	25709
VILLAGES OF JACKSON CREEK, T	ГНЕ			
3980 SOUTH JACKSON DR		<b>Telephone</b> (816) 795-1433	Alzheimer's Unit	No
INDEPENDENCE	MO 64057-2205	Level of Care: ALF**	Bed Capacity	62 N
Mailing Address 3980 S JACKSON DR		County JACKSON	DMH Licensed	No

**Facility Number** 

25709

MO 64057-2205

INDEPENDENCE

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VILLAGES OF ST PETERS MEMO	RY CARE			
5300 EXECUTIVE CENTER PARKWA	AY	<b>Telephone</b> (636) 477-6955	Alzheimer's Unit	Yes
SAINT PETERS	MO 63376-3182	Level of Care: ALF**	Bed Capacity	60
Mailing Address 5300 EXECUTIVE C	ENTER PARKWAY	County SAINT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-3182	Region 5	Facility Number	29889
VILLAGES OF ST PETERS, THE				
5400 EXECUTIVE CENTRE PKWY		<b>Telephone</b> (636) 922-7600	Alzheimer's Unit	No
SAINT PETERS	MO 63376-2594	Level of Care: ALF**	<b>Bed Capacity</b>	62
Mailing Address 5400 EXECUTIVE C	ENTRE PKWY	County SAINT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-2594	Region 5	Facility Number	26014
VILLAGES OF ST PETERS, THE		m 1 1 (200) 000 7:00		••
5400 EXECUTIVE CENTRE PKWY		<b>Telephone</b> (636) 922-7600	Alzheimer's Unit	Yes
SAINT PETERS	MO 63376-2594	Level of Care: SNF	Bed Capacity	130
Mailing Address 5400 EXECUTIVE C		County SAINT CHARLES	DMH Licensed	No
SAINT PETERS	MO 63376-2594	Region 5 Medicare/Medicaid	Facility Number	26014
VILLAS OF JACKSON LLC THE				
670 BROADRIDGE DRIVE		<b>Telephone</b> (573) 986-8210	Alzheimer's Unit	Yes
JACKSON	MO 63755-3044	Level of Care: ALF**	Bed Capacity	76
Mailing Address 670 BROADRIDGE		County CAPE GIRARDEAU	DMH Licensed	No
JACKSON	MO 63755-3044	Region 2	Facility Number	30623
		Region -	Tuesday Tunner	30023
VINTAGE GARDENS ASSISTED LI	VING			
3302 NORTH WOODBINE ROAD		<b>Telephone</b> (816) 390-9555	Alzheimer's Unit	Yes
SAINT JOSEPH	MO 64505-9323	Level of Care: ALF	Bed Capacity	51
Mailing Address 3302 NORTH WOOI	OBINE RD	County BUCHANAN	DMH Licensed	No
SAINT JOSPEH	MO 64505-9323	Region 4	Facility Number	22959
VINTAGE GARDENS ASSISTED LI	VINC			
3302 NORTH WOODBINE ROAD	VING	<b>Telephone</b> (816) 390-9555	Alzheimer's Unit	No
SAINT JOSEPH	MO 64505-9323	Level of Care: ALF**	Bed Capacity	44
Mailing Address 3302 N WOODBINE		County BUCHANAN	DMH Licensed	No
SAINT JOSEPH	MO 64505-9323	Region 4	Facility Number	22959
		Region		
VSL SPRINGFIELD ASSISTED LIV	ING, LLC			
1401 WEST ELFINDALE STREET		<b>Telephone</b> (417) 831-3828	Alzheimer's Unit	NO
SPRINGFIELD	MO 65807-	Level of Care: ALF	Bed Capacity	50
Mailing Address 1401 WEST ELFIND	ALE STREET	County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65807-	Region 1	Facility Number	32492
WAGNER RESIDENTIAL CARE, IN	NC			
320 N CHAMBER DR		<b>Telephone</b> (573) 783-4511	Alzheimer's Unit	No
FREDERICKTOWN	MO 63645-7947	Level of Care: RCF	Bed Capacity	40
Mailing Address 320 N CHAMBER D		County MADISON	DMH Licensed	Yes
FREDERICKTOWN	MO 63645-7947	Region 2	Facility Number	28451
		3	-	

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WALNUT STREET ASSISTED LIVE	NG			
404 WALNUT ST		<b>Telephone</b> (573) 996-4283	Alzheimer's Unit	No
DONIPHAN	MO 63935-1420	Level of Care: ALF	Bed Capacity	35
Mailing Address 404 WALNUT ST		County RIPLEY	DMH Licensed	Yes
DONIPHAN	MO 63935-1420	Region 2	Facility Number 0	8354
WARRENSBURG MANOR CARE CI	ENTER			
400 CARE CENTER DR		<b>Telephone</b> (660) 747-2216	Alzheimer's Unit	No
WARRENSBURG	MO 64093-3100	Level of Care: SNF	Bed Capacity	88
Mailing Address 400 CARE CENTER	DR	County JOHNSON	DMH Licensed	No
WARRENSBURG	MO 64093-3100	Region 3 Medicare/Medicaid	Facility Number 0	8383
			•	
WA DDENITON MANOD				
WARRENTON MANOR 65 STATE HIGHWAY AA		Tolonhous (626) 456 9700	Alzheimer's Unit	NT-
WRIGHT CITY	MO 63383-3301	Telephone (636) 456-8700 Level of Care: SNF	Bed Capacity	No 120
			DMH Licensed	No
Mailing Address 65 STATE HIGHWA' WRIGHT CITY	MO 63390-3301	•		
WRIGHT CITT	MO 03390-3301	Region 6 Medicare/Medicaid	Facility Number 0	2505
WARSAW HEALTH AND REHABIL	LITATION CENTER			
1609 SUNCHASE DR		<b>Telephone</b> (660) 438-2970	Alzheimer's Unit	Yes
WARSAW	MO 65355-3059	Level of Care: SNF	Bed Capacity	90
Mailing Address 1609 SUNCHASE DE	₹	County BENTON	DMH Licensed	No
WARSAW	MO 65355-3059	Region 6 Medicare/Medicaid	Facility Number 1	5243
WATERFORD LADIES HOME				
500 NW VESPER ST		<b>Telephone</b> (816) 228-6337	Alzheimer's Unit	No
BLUE SPRINGS	MO 64014-2744	Level of Care: RCF	Bed Capacity	27
Mailing Address 500 NW VESPER ST		<b>County</b> JACKSON	DMH Licensed	No
BLUE SPRINGS	MO 64014-2744	Region 3	Facility Number 1	3774
WATERFORD SOUTH				
11515 HOLMES RD		<b>Telephone</b> (816) 942-4898	Alzheimer's Unit	No
KANSAS CITY	MO 64131-3856	Level of Care: ALF	Bed Capacity	28
Mailing Address 11515 HOLMES RD		County JACKSON	DMH Licensed	Yes
KANSAS CITY	MO 64131-3856	<b>Region</b> 3	Facility Number 1	4888
WATTS STREET MANOR				
301 WATTS ST		<b>Telephone</b> (573) 431-4874	Alzheimer's Unit	No
PARK HILLS	MO 63601-1839	Level of Care: RCF*	Bed Capacity	16
Mailing Address PO BOX 481		County SAINT FRANCOIS	DMH Licensed	Yes
PARK HILLS	MO 63601-0481	Region 2		06579
· · · · · · · · · · · · · · · · · · ·	05001 0701	Acgivii 2	z ucincy rumber 0	.5517
MEDD CHEN HE AT MALAND PROFES	MI TELEFONI CENTEED			
WEBB CITY HEALTH AND REHAE	BILITATION CENTER	Tolonhous (417) 672 1022	Alahaimania II	V
2077 STADIUM DR	MO 64970 0742	<b>Telephone</b> (417) 673-1933	Alzheimer's Unit	Yes
WEBB CITY  Mailing Address 2077 STADIUM DB	MO 64870-9743	Level of Care: SNF	Bed Capacity	120
Mailing Address 2077 STADIUM DR	MO 64970 0742	County JASPER	DMH Licensed	No
WEBB CITY	MO 64870-9743	Region 1 Medicare/Medicaid	Facility Number 1	2286

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WEBCO MANOR			
1687 W WASHINGTON ST		<b>Telephone</b> (417) 859-5144	Alzheimer's Unit No
MARSHFIELD	MO 65706-2325	Level of Care: SNF	Bed Capacity 120
Mailing Address 1687 W WASHINGTO		County WEBSTER	DMH Licensed No
MARSHFIELD	MO 65706-2325	Region 1 Medicare/Medicaid	Facility Number 08405
MAKSHITELD	WIO 03700-2323	Region 1 Medicare/Medicaid	racinty Number 08403
WEBWOOD ASSISTED LIVING, LLC	2		
1640 WALDO HATLER DRIVE		<b>Telephone</b> (417) 451-2997	Alzheimer's Unit NO
NEOSHO	MO 64850-	Level of Care: ALF	Bed Capacity 31
Mailing Address 1640 WALDO HATLE		County NEWTON	DMH Licensed No
NEOSHO	MO 64850-	Region 1	Facility Number 31265
NEOSITO	1010 04030-	Region	racinty Number 31203
WEDGEWOOD GARDENS			
17996 BUSINESS 13		<b>Telephone</b> (417) 272-6666	Alzheimer's Unit Yes
REEDS SPRING	MO 65737-9663	Level of Care: ALF**	<b>Bed Capacity</b> 46
Mailing Address 17996 BUSINESS 13		County STONE	DMH Licensed No
REEDS SPRING	MO 65737-9663	Region 1	Facility Number 20615
		10g.v.	20013
WELCOME HOME ASSISTED LIVIN	NG LLC		
5 ADAMS DRIVE		<b>Telephone</b> (573) 624-3800	Alzheimer's Unit NO
DEXTER	MO 63841-1985	Level of Care: ALF**	Bed Capacity 9
Mailing Address 5 ADAMS DRIVE		County STODDARD	DMH Licensed No
DEXTER	MO 63841-1985	Region 2	Facility Number 32148
WELLER PLACE RETIREMENT CE	NTER		
510 WELLER STREET		<b>Telephone</b> (660) 395-2273	Alzheimer's Unit No
MACON	MO 63552-1996	Level of Care: RCF	<b>Bed Capacity</b> 18
Mailing Address 510 WELLER STREET	Γ	County MACON	<b>DMH Licensed</b> No
MACON	MO 63552-1996	Region 5	Facility Number 30888
WEST COUNTY CARE CENTER			
312 SOLLEY DR		<b>Telephone</b> (636) 391-0666	Alzheimer's Unit NO
BALLWIN	MO 63021-5248	Level of Care: SNF	Bed Capacity 137
Mailing Address 312 SOLLEY DR	110 03021 3240	County SAINT LOUIS COUNTY	DMH Licensed No
BALLWIN	MO 63021-5248	Region 7 Medicare/Medicaid	Facility Number 04970
DALLWIN	WIO 03021-3240	Region / Wedicare/Medicard	racinty Number 04970
WEST PINE GROUP HOME			
4232 WEST PINE BLVD		<b>Telephone</b> (314) 531-9450	Alzheimer's Unit No
SAINT LOUIS	MO 63108-2840	Level of Care: RCF	<b>Bed Capacity</b> 9
Mailing Address 4232 WEST PINE BLV	VD	County SAINT LOUIS CITY	<b>DMH Licensed</b> Yes
SAINT LOUIS	MO 63108-2840	Region 7	Facility Number 05948
WEST VUE NURSING AND REHABI	LITATION CENTER	Tolophono (417) 256 2152	Alzheimente Tivit
210 DAVIS DR	MO 65775 2241	Telephone (417) 256-2152	Alzheimer's Unit Yes  Ped Capacity 120
WEST PLAINS  Molling Address 210 DAVIS DR	MO 65775-2241	Level of Care: SNF	Bed Capacity 130
Mailing Address 210 DAVIS DR	MO (5775 2241	County HOWELL	DMH Licensed No
WEST PLAINS	MO 65775-2241	Region 1 Medicare/Medicaid	Facility Number 21733

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WESTBROOK CARE CENTER, INC	<b>1</b>			
401 S PLATTE CLAY WAY		<b>Telephone</b> (816) 628-2222	Alzheimer's Unit	No
KEARNEY	MO 64060-7714	Level of Care: RCF*	Bed Capacity	27
Mailing Address 401 S PLATTE CLA		County CLAY	DMH Licensed	No
KEARNEY	MO 64060-7714	•		
KEAKNE I	WO 04000-7/14	Region 4	Facility Number	19757
WESTBROOK TERRACE - ASSIST	ED LIVING BY AMERICARE			
3335 NORTH TEN MILE DR		<b>Telephone</b> (573) 635-2600	Alzheimer's Unit	No
JEFFERSON CITY	MO 65109-0528	Level of Care: ALF**	Bed Capacity	36
Mailing Address 3335 NORTH TEN M	MILE DR	County COLE	DMH Licensed	No
JEFFERSON CITY	MO 65109-0528	Region 6		20440
JETT ENDON CITT	WO 03107 0320	region 0	racinty Number	20440
WESTBURY SENIOR LIVING THE				
550 STONE VALLEY PARKWAY		<b>Telephone</b> (573) 818-7030	Alzheimer's Unit	YES
COLUMBIA	MO 65203-5567	Level of Care: ALF**	<b>Bed Capacity</b>	66
Mailing Address 550 STONE VALLE	Y PARKWAY	County BOONE	DMH Licensed	No
COLUMBIA	MO 65203-5567	Region 6	Facility Number	32666
COLOMBIA	110 35205 550)	Region 0	Tuestey (Amaser	32000
WESTCHESTER HOUSE, THE				
550 WHITE RD		<b>Telephone</b> (314) 469-1200	Alzheimer's Unit	No
CHESTERFIELD	MO 63017-2316	Level of Care: SNF	Bed Capacity	159
Mailing Address 550 WHITE RD		County SAINT LOUIS COUNTY	DMH Licensed	No
CHESTERFIELD	MO 63017-2316	Region 7 Medicare/Medicaid	Facility Number	08474
WESTFIELD NURSING CENTER, I 3144 STATE HIGHWAY FF		<b>Telephone</b> (573) 471-1174	Alzheimer's Unit	No
SIKESTON	MO 63801-8580	Level of Care: SNF	Bed Capacity	98
Mailing Address PO BOX 489		County NEW MADRID	DMH Licensed	No
SIKESTON	MO 63801-0489	Region 2 Medicare/Medicaid	Facility Number	07306
WESTGATE				
3130 JOHN DUFFY DR		<b>Telephone</b> (417) 553-3688	Alzheimer's Unit	Yes
JOPLIN	MO 64804-1569	Level of Care: SNF	Bed Capacity	120
Mailing Address 3130 JOHN DUFFY	DR	County JASPER	DMH Licensed	No
JOPLIN	MO 64804-1569	Region 1 Medicare/Medicaid	Facility Number	31754
WESTPORT ESTATES - ASSISTED	LIVING BY AMERICARE			
904 APACHE DR		<b>Telephone</b> (660) 886-5500	Alzheimer's Unit	Yes
MARSHALL	MO 65340-2900	Level of Care: ALF**	Bed Capacity	62
Mailing Address 904 APACHE DR	1.10 00010 2700	County SALINE	DMH Licensed	No
MARSHALL	MO 65340 2000	•		
WIAKSHALL	MO 65340-2900	Region 5	Facility Number	16202
WESTVIEW AT ELLISVILLE ASSI	STED LIVING	T. I. I		***
27 REINKE RD	150 50004 4504	<b>Telephone</b> (636) 527-5554	Alzheimer's Unit	Yes
ELLISVILLE	MO 63021-4734	Level of Care: ALF**	Bed Capacity	99
Mailing Address 27 REINKE RD		County SAINT LOUIS COUNTY	DMH Licensed	No
ELLISVILLE	MO 63021-4734	Region 7	Facility Number	28184

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WESTVIEW NURSING HOME				
301 WEST DUNLOP ST		<b>Telephone</b> (573) 267-3920	Alzheimer's Unit	No
CENTER	MO 63436-2267	Level of Care: SNF	<b>Bed Capacity</b>	60
Mailing Address 301 WEST DUNLOP	ST	County RALLS	DMH Licensed	No
CENTER	MO 63436-2267	Region 5 Medicare/Medicaid	Facility Number	15634
WESTWOOD HILLS HEALTH & RI	CHARILITATION CENTER			
3100 WARRIOR LN	SIMBLE TIME OF CENTER	<b>Telephone</b> (573) 785-0851	Alzheimer's Unit	No
POPLAR BLUFF	MO 63901-8686	Level of Care: SNF	Bed Capacity	132
Mailing Address 3100 WARRIOR LAN		County BUTLER	DMH Licensed	No
POPLAR BLUFF	MO 63901-8686	Region 2 Medicare/Medicaid	Facility Number	08512
		region - Medicare/Medicard	Tuesting Trusting	00312
WESTWOOD LIVING CENTER		T-1-1-1 (CCO) 995 9107	Alabataan Tiri	37
1801 NORTH GAINES DR	MO (4725 1127	<b>Telephone</b> (660) 885-8196	Alzheimer's Unit	Yes
CLINTON 1991 N. CARTES DR	MO 64735-1127	Level of Care: SNF	Bed Capacity	120
Mailing Address 1801 N GAINES DR	MO (4725 1127	County HENRY	DMH Licensed	No
CLINTON	MO 64735-1127	Region 1 Medicare/Medicaid	Facility Number	08521
WEXFORD PLACE ASSISTED LIVE	NG AND MEMORY SUPPORT BY SEN	NIOR STAR		
6460 NORTH COSBY AVE		<b>Telephone</b> (816) 743-4259	Alzheimer's Unit	Yes
KANSAS CITY	MO 64151-2377	Level of Care: ALF**	Bed Capacity	98
Mailing Address 6460 NORTH COSBY		County PLATTE	DMH Licensed	No
KANSAS CITY	MO 64151-2377	Region 4	Facility Number	28861
WHISPERING OAKS RCF II, LLC				
203 NORTH B ST		<b>Telephone</b> (573) 686-4490	Alzheimer's Unit	No
POPLAR BLUFF	MO 63901-5413	Level of Care: RCF*	<b>Bed Capacity</b>	45
Mailing Address 203 NORTH B ST		County BUTLER	DMH Licensed	Yes
POPLAR BLUFF	MO 63901-5413	Region 2	Facility Number	16751
WHISPERING PINES SENIOR LIVE	NG LLC			
4904 EAST WELLRIDGE LN		<b>Telephone</b> (417) 781-0099	Alzheimer's Unit	No
JOPLIN	MO 64801-8793	Level of Care: RCF*	<b>Bed Capacity</b>	20
Mailing Address 4904 EAST WELLRII	DGE LN	County JASPER	DMH Licensed	No
JOPLIN	MO 64801-8793	Region 1	Facility Number	09477
WHITE OAK ACCIONED I WING				
WHITE OAK ASSISTED LIVING		The Land (916) 254 2500	A1 1	NT-
1515 WEST WHITE OAK	MO (4050 2557	<b>Telephone</b> (816) 254-3500	Alzheimer's Unit	No
INDEPENDENCE	MO 64050-2557	Level of Care: ALF**	Bed Capacity	78 N
Mailing Address 1515 WEST WHITE (		County JACKSON	DMH Licensed	No
INDEPENDENCE	MO 64050-2557	Region 3	Facility Number	06604
WILDWOOD SENIOR LIVING THE				
3002 SOUTH JOHN DUFFY DRIVE		<b>Telephone</b> (417) 623-2233	Alzheimer's Unit	YES
JOPLIN	MO 64804-	Level of Care: ALF**	<b>Bed Capacity</b>	74
Mailing Address 3002 SOUTH JOHN I	OUFFY DRIVE	County JASPER	DMH Licensed	No
IODI IN	MO 64904	n 1	Facility Number	21270

**Facility Number** 

31370

MO 64804-

**JOPLIN** 

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WILLARD CARE CENTER			
400 WEST WALNUT LN		<b>Telephone</b> (417) 742-3593	Alzheimer's Unit Yes
WILLARD	MO 65781-9432	Level of Care: SNF	<b>Bed Capacity</b> 66
Mailing Address 400 W WALNUT LN		County GREENE	DMH Licensed No
WILLARD	MO 65781-9432	Region 1 Medicare/Medicaid	Facility Number 16393
WILLOW BROOKE - ASSISTED LIV	VINC RV AMERICARE		
#1 NORTH POTOMAC CT	VIII DI AMERICARE	<b>Telephone</b> (636) 583-2799	Alzheimer's Unit No
UNION	MO 63084-1113	Level of Care: ALF**	Bed Capacity 50
Mailing Address 1 NORTH POTOMA		County FRANKLIN	DMH Licensed No
UNION	MO 63084-1113	Region 6	Facility Number 13596
WILLOW CARE NURSING HOME			
2646 STATE ROUTE 76		<b>Telephone</b> (417) 469-3152	Alzheimer's Unit Yes
WILLOW SPRINGS	MO 65793-8254	Level of Care: SNF	Bed Capacity 105
Mailing Address PO BOX 309		County HOWELL	DMH Licensed No
WILLOW SPRINGS	MO 65793-0309	Region 1 Medicare/Medicaid	Facility Number 08614
WILLOW CARE BEHARD ITATION	N & THE AT THE CADE CENTEED		
WILLOW CARE REHABILITATION 328 MUNGER LN	N& HEALTH CARE CENTER	<b>Telephone</b> (573) 221-9122	Alzheimer's Unit No
HANNIBAL	MO 63401-2361	Level of Care: SNF	Bed Capacity 111
Mailing Address 328 MUNGER LN	WIO 03401-2301	County MARION	DMH Licensed No
HANNIBAL	MO 63401-2361	Region 5 Medicare/Medicaid	Facility Number 03340
HAMDAL	WO 03401-2301	Region 5 Medicare/Medicaid	Facility Number 03340
WILLOW CREEK MEMORY CARE	AT LEE'S SUMMIT		
3101 SW 3RD STREET		<b>Telephone</b> (816) 321-1648	Alzheimer's Unit Yes
LEE'S SUMMIT	MO 64081-4060	Level of Care: ALF**	Bed Capacity 54
Mailing Address 3101 SW 3RD STREE		County JACKSON	<b>DMH Licensed</b> No
LEE'S SUMMIT	MO 64081-4060	Region 3	Facility Number 31077
WILLOW WEST APARTMENTS			
2644 STATE ROUTE 76		<b>Telephone</b> (417) 469-3152	Alzheimer's Unit No
WILLOW SPRINGS	MO 65793-8254	Level of Care: ALF	<b>Bed Capacity</b> 36
Mailing Address PO BOX 309		County HOWELL	DMH Licensed No
WILLOW SPRINGS	MO 65793-0309	Region 1	Facility Number 08614
WILSHIRE AT LAKEWOOD REHA	B CENTER		
600 NE MEADOWVIEW DR	,,	<b>Telephone</b> (816) 554-9866	Alzheimer's Unit No
LEE'S SUMMIT	MO 64064-1983	Level of Care: SNF	Bed Capacity 170
Mailing Address 600 NE MEADOWVI		County JACKSON	DMH Licensed No
LEE'S SUMMIT	MO 64064-1983	Region 3 Medicare/Medicaid	Facility Number 22471
WILSON'S CREEK NURSING & RE	НАВ	m.l. 1	A11.*   WY **
3403 WEST MT VERNON	MO (5000 504)	<b>Telephone</b> (417) 864-5600	Alzheimer's Unit Yes
SPRINGFIELD	MO 65802-5241	Level of Care: SNF	Bed Capacity 172
Mailing Address 3403 WEST MT VER		County GREENE	DMH Licensed No
SPRINGFIELD	MO 65802-5241	Region 1 Medicare/Medicaid	Facility Number 05579

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WINCHESTER NURSING CENTER	INC			
400 WINCHESTER DRIVE	, inc	<b>Telephone</b> (573) 293-6702	Alzheimer's Unit	Vo.
BERNIE	MO 63822-0760	Level of Care: SNF		<b>4</b> 4
Mailing Address PO BOX 760	WO 03822-0700	County STODDARD	• •	Vo
BERNIE	MO 63822-0760	Region 2 Medicare/Medicaid	Facility Number 3139	
DERIVIE	1410 03822-0700	Region 2 Medicare/Medicaid	racinty Number 313	,1
WINCHESTER PLACE ASSISTED	LIVING, LLC			
404 WINCHESTER ROAD		<b>Telephone</b> (573) 293-6705	Alzheimer's Unit	lo
BERNIE	MO 63822-7500	Level of Care: ALF**	Bed Capacity	26
Mailing Address PO BOX 760		County STODDARD	DMH Licensed N	No
BERNIE	MO 63822-0760	Region 2	Facility Number 2491	12
WINDEMERE HEALTHCARE CEN	TER LLC			
3100 NORTH WEST VIVION RD		<b>Telephone</b> (816) 741-0753	Alzheimer's Unit N	О
RIVERSIDE	MO 64150-9436	Level of Care: RCF		65
Mailing Address 3100 NORTH WEST		County PLATTE	• •	No
RIVERSIDE	MO 64150-9436	Region 4	Facility Number 0866	
M, DNOD D	110 01100 7100	Region	2401109 1 14111001 00000	,0
WINDSOR ESTATES OF ST CHAR	LES SNAL, LLC			
2150 WEST RANDOLPH ST		<b>Telephone</b> (636) 946-4966	Alzheimer's Unit Y	es
SAINT CHARLES	MO 63301-0894	Level of Care: ALF**	Bed Capacity	90
Mailing Address 2150 WEST RANDO	LPH ST	County SAINT CHARLES	DMH Licensed N	Vо
SAINT CHARLES	MO 63301-0894	Region 5	Facility Number 0631	16
WINDSOR ESTATES OF ST CHAR	LES SNAL, LLC			
2150 WEST RANDOLPH ST		<b>Telephone</b> (636) 946-4966	Alzheimer's Unit N	Ю
SAINT CHARLES	MO 63301-0894	Level of Care: SNF	Bed Capacity	66
Mailing Address 2150 WEST RANDO		County SAINT CHARLES		Vo
SAINT CHARLES	MO 63301-0894	Region 5 Medicare/Medicaid	Facility Number 0631	16
WINDSOR HEALTHCARE & REHA	AR CENTER			
809 WEST BENTON	ELITER .	<b>Telephone</b> (660) 647-3102	Alzheimer's Unit	Vо
WINDSOR	MO 65360-1239	Level of Care: SNF		60
Mailing Address PO BOX 5	120 00000 1209	County HENRY	- ·	No
WINDSOR	MO 65360-0005	Region 1 Medicare/Medicaid	Facility Number 2171	
			•	
WINFIELD RESIDENTIAL CARE				
220 WEST WALNUT ST		<b>Telephone</b> (636) 668-8110	Alzheimer's Unit	Vо
WINFIELD	MO 63389-1122	Level of Care: RCF	Bed Capacity	20
Mailing Address 220 WEST WALNUT	ΓST	County LINCOLN	DMH Licensed Y	es
WINFIELD	MO 63389-1122	Region 5	Facility Number 0872	29
WOOD OAKS, INC				
1804 SOUTH STERLING AVE		<b>Telephone</b> (816) 254-5400	Alzheimer's Unit	Vо
INDEPENDENCE	MO 64052-3845	Level of Care: RCF*		30
Mailing Address PO BOX 520049		County JACKSON	- ·	es
INDEPENDENCE	MO 64052-0049	Region 3	Facility Number 0238	
·	***	8	0230	-

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WOODLAND MANOR				
1347 EAST VALLEY WATERMILL RD		<b>Telephone</b> (417) 833-1220	Alzheimer's Unit	No
SPRINGFIELD	MO 65803-3739	Level of Care: SNF	<b>Bed Capacity</b>	180
Mailing Address 1347 EAST VALLEY WATERMILL RD		County GREENE	DMH Licensed	No
SPRINGFIELD	MO 65803-3739	Region 1 Medicare/Medicaid	Facility Number	05794
WOODLAND MANOR NURSING C	ENTER			
100 WOODLAND COURT		<b>Telephone</b> (636) 296-1400	Alzheimer's Unit	No
ARNOLD	MO 63010-2030	Level of Care: SNF	<b>Bed Capacity</b>	178
Mailing Address 100 WOODLAND CT		County JEFFERSON	DMH Licensed	No
ARNOLD	MO 63010-2030	Region 2 Medicare/Medicaid	Facility Number	12549
WORTH COUNTY CONVALESCEN	TO CHATTED			
503 E 4TH ST	I CENTER	<b>Telephone</b> (660) 564-3304	Alzheimer's Unit	No
	3.50 - 5.44.5 - 5.00 - 5	• '		
GRANT CITY	MO 64456-8363	Level of Care: SNF	Bed Capacity	50
Mailing Address 503 E 4TH ST		County WORTH	DMH Licensed	No

Medicare/Medicaid

**Facility Number** 

08779

MO 64456-8363

GRANT CITY

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